



PATENT  
IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

Appln. No. : 10/683,854  
Applicant : Noel R. Johnson et al

Filed : October 10, 2003  
Title : High Capacity Food  
Processing System

TC/A.U. :  
Examiner :

Docket No. : 4767-00046

CERTIFICATE OF MAILING

I hereby certify that this  
correspondence is being deposited with the  
United States Postal Service with sufficient  
postage as first class mail in an envelope  
addressed to: Commissioner for Patents,  
P.O. Box 1450, Alexandria, VA 22313-  
1450 on this 15th day of December 2003.

*Jo Ellen Bullock* 12-15-03  
Jo Ellen Bullock Date

TRANSMISSION OF FEES  
Under 37 CFR 1.28(c)

Transmitted herewith are the below noted fees in accordance with 37 CFR 1.28(c)  
for correcting errors in small entity status, and in payment of large entity fees. Please  
consider this as notice of correction from small entity status to large entity status.

In accordance with 37 CFR 1.28(c)(2)(i), the deficiency owed for each previous  
fee erroneously paid as a small entity is calculated as the difference between the current  
fee amount for a large entity on the present date on which the deficiency is paid in full  
and the amount of the previous erroneous small entity fee payment. The total deficiency  
payment owed is the sum of the individual deficiency owed amounts for each fee amount  
previously erroneously paid as a small entity.

In accordance with 37 CFR 1.28(c)(2)(ii), itemization of the total deficiency  
payment is set forth below, including each particular type of fee that was erroneously paid  
as a small entity, the small entity fee actually paid, and when, the deficiency owed  
amount for each fee erroneously paid, and the total deficiency payment owed, which is  
the sum total of the individual deficiency owed amounts.

12/22/2003 MAHME1 00000002 10683854

|            |           |
|------------|-----------|
| 01 FC:1001 | 770.00 OP |
| 02 FC:1201 | 250.00 OP |
| 03 FC:1202 | 522.00 OP |

Application No. 10/683,854  
Transmission of Fees dated December 15, 2003

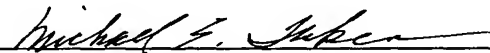
| <u>Item</u>      | <u>Previous Fee<br/>Erroneously Paid As<br/>Small<br/>Entity, and Date</u> | <u>Current Fee<br/>For Large<br/>Entity</u> | <u>Difference<br/>(Deficiency<br/>Amount Owed)</u> |
|------------------|--|---|--|
| Basic Filing Fee | \$385 (10/10/03)   | \$ 770                                      | \$ 385   |
| Extra Claim Fees | 390 (10/10/03)   | 780   | 390  |
|                  |  | Sum Total                                   | \$ 775   |

A check in the amount of \$775 is enclosed herewith in payment of the noted sum total.

No further fees should be due in connection herewith. If further fees are due in connection herewith, the Commissioner is hereby authorized to charge same to applicant's attorney's deposit account number 01.2000. A duplicate copy hereof is enclosed.

Respectfully submitted,

ANDRUS, SCEALES, STARKE & SAWALL, LLP

  
\_\_\_\_\_  
Michael E. Taken  
(Reg. No. 28,120)

Andrus, Sceales, Starke & Sawall, LLP  
100 East Wisconsin Avenue, Suite 1100  
Milwaukee, WI 53202  
(414) 271-7590

## Adjust RAM Sale/Item

Adjustment

Reason:

Sale

Sale Ref: 10/17/2003 EFLORES 78 Status: Active

Mailroom Date: 10/10/2003 Type: 1 Name/Number: 10683854 Attorney Docket No: 4767-00046

Select Sale

| No   | Fee  | St | Name/Number | Fee    | Qty | Partial | Extended | D |
|------|------|----|-------------|--------|-----|---------|----------|---|
| St   | Code |    |             | Amount |     |         | Amount   |   |
| 2001 | A    |    | 10683854    | 385.00 | 1   |         | 385.00   |   |
| 2201 | A    |    | 10683854    | 43.00  | 3   |         | 129.00   |   |
| 2202 | A    |    | 10683854    | 9.00   | 29  |         | 261.00   |   |

Undo All

Total Amount to Credit:

Set Payment to credit back

Set Amount

Undo all

Payment Detail



Save



Cancel



Print Screen

Adjustment date: 12/22/2003 NAMED1  
 10/17/2003 EFLORES 00000078 10683854  
 01 FC:2001 -385.00 OP  
 02 FC:2201 -129.00 OP  
 03 FC:2202 -261.00 OP



DHC \$  
1.28-c

Please type a plus sign (+) inside this box [ + ]

Patent and Trademark Office: U.S. Department of Commerce

0001 PTO  
Rev. 10/95

U.S. Department of Commerce  
Patent and Trademark Office

|                      |                  |
|----------------------|------------------|
| Application Number   | 10/683,854       |
| Filing Date          | October 10, 2003 |
| First Named Inventor | Noel R. Johnson  |
| Group Art Unit       |                  |
| Examiner Name        |                  |

### TRANSMITTAL FORM

(to be used for all correspondence after initial filing)

Total Number of pages in this Submission

7

Attorney Docket Number 4767-00046

### ENCLOSURES (check all that apply)

- ☒ Fee Transmittal Form
  - ☒ Fee Attached
- ☐ Amendment/Response
  - ☐ After final
  - ☐ Affidavits/Declaration(s)
- ☐ Extension of Time Request
- ☐ Express Abandonment Request
- ☐ Information Disclosure Statement/PTO-1449
- ☐ Certified Copy of Priority Document(s)
- ☐ Response to Missing Parts/
  - ☐ Incomplete Application
  - ☐ Response to Missing Parts Under 37 1.52 or 1.53
- ☐ Request to Rescind Previous Nonpublication Request

- ☐ Assignment Papers (for an Application)
- ☐ Drawing(s)
- ☐ Licensing-related Papers
- ☐ Petition
- ☐ Petition To Convert a Provisional Application
- ☐ Power of Attorney, Revocation, Change of Correspondence Address
- ☐ Terminal Disclaimer
- ☐ Request for Refund
- ☐ CD, Number of CDs \_\_\_\_\_

- ☐ After Allowance Communication To Group
- ☐ Appeal Communication to Board Of Appeals and Interferences
- ☐ Appeal Communication to Group ( Appeal Notice, Brief, Reply Brief)
- ☐ Proprietary Information
- ☐ Status Letter
- ☒ Additional Enclosure(s) (Please identify below)
  - Transmission of Fees Under 37 CFR 1.28(c)
  - Return receipt postcard

REMARKS:

### SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT

|                         |   |
|-------------------------|---|
| Firm Or Individual Name | Michael E. Taken (Reg. No. 28,120)<br>ANDRUS, SCEALES, STARKE & SAWALL, LLP<br>100 East Wisconsin Avenue, Suite 1100, Milwaukee, WI 53202 |
| Signature               | <i>Michael E. Taken</i>   |
| Date                    | December 15, 2003   |

### CERTIFICATE OF MAILING

I hereby certify that this correspondence is being deposited with the United States Postal Service as first class mail in an envelope addressed to: Commissioner for Patents, Mail Stop: Fee, P.O. Box 1450, Alexandria, VA 22313-1450 on the 15th day of December, 2003.


Typed or printed name Jo Ellen Bullock

Signature

*Jo Ellen Bullock*

Date

12/15/2003

| <div style="text-align: center;">  <p><b>FEE TRANSMITTAL</b></p> </div> <p>PTO/SB/17<br/>(8/96)</p> <p><input type="checkbox"/> Applicant claims small entity status. See 37 CFR 1.27</p> <p>Total Amount of Payment (\$ <b>775.00</b>)</p>  |                            | <p style="text-align: center;"><b>COMPLETE IF KNOWN</b></p> <table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <td style="width: 50%;">Application Number</td> <td><b>10/683,854</b></td> </tr> <tr> <td>Filing Date</td> <td><b>October 10, 2003</b></td> </tr> <tr> <td>First Named Inventor</td> <td><b>Noel R. Johnson</b></td> </tr> <tr> <td>Group Art Unit</td> <td></td> </tr> <tr> <td>Examiner Name</td> <td></td> </tr> <tr> <td>Attorney Docket Number</td> <td><b>4767-00046</b></td> </tr> </table>  |            | Application Number         | <b>10/683,854</b>          | Filing Date     | <b>October 10, 2003</b> | First Named Inventor | <b>Noel R. Johnson</b> | Group Art Unit                      |  | Examiner Name |          | Attorney Docket Number                                 | <b>4767-00046</b> |          |          |                           |  |            |            |   |  |          |          |   |  |                                |            |   |  |          |         |   |  |          |          |  |  |          |          |   |  |            |          |  |  |           |           |   |  |          |          |                  |  |          |          |  |  |          |          |                          |  |            |            |   |  |          |         |  |  |            |          |  |  |            |          |                                |  |          |          |                  |  |          |          |                 |  |          |          |                               |  |         |         |                                     |  |          |          |  |  |         |         |  |  |          |          |  |  |          |          |  |  |          |          |   |  |          |          |   |  |                     |  |   |            |                                |  |                              |  |
|--|----------------------------|---|------------|----------------------------|----------------------------|-----------------|-------------------------|----------------------|------------------------|-------------------------------------|--|---------------|----------|--|-------------------|----------|----------|---------------------------|--|------------|------------|---|--|----------|----------|---|--|--------------------------------|------------|---|--|----------|---------|---|--|----------|----------|--|--|----------|----------|---|--|------------|----------|--|--|-----------|-----------|---|--|----------|----------|------------------|--|----------|----------|--|--|----------|----------|--------------------------|--|------------|------------|---|--|----------|---------|--|--|------------|----------|--|--|------------|----------|--------------------------------|--|----------|----------|------------------|--|----------|----------|-----------------|--|----------|----------|-------------------------------|--|---------|---------|-------------------------------------|--|----------|----------|--|--|---------|---------|--|--|----------|----------|--|--|----------|----------|--|--|----------|----------|---|--|----------|----------|---|--|---------------------|--|---|------------|--------------------------------|--|------------------------------|--|
| Application Number   | <b>10/683,854</b>          |   |            |                            |                            |                 |                         |                      |                        |                                     |  |               |          |  |                   |          |          |                           |  |            |            |   |  |          |          |   |  |                                |            |   |  |          |         |   |  |          |          |  |  |          |          |   |  |            |          |  |  |           |           |   |  |          |          |                  |  |          |          |  |  |          |          |                          |  |            |            |   |  |          |         |  |  |            |          |  |  |            |          |                                |  |          |          |                  |  |          |          |                 |  |          |          |                               |  |         |         |                                     |  |          |          |  |  |         |         |  |  |          |          |  |  |          |          |  |  |          |          |   |  |          |          |   |  |                     |  |   |            |                                |  |                              |  |
| Filing Date  | <b>October 10, 2003</b>    |   |            |                            |                            |                 |                         |                      |                        |                                     |  |               |          |  |                   |          |          |                           |  |            |            |   |  |          |          |   |  |                                |            |   |  |          |         |   |  |          |          |  |  |          |          |   |  |            |          |  |  |           |           |   |  |          |          |                  |  |          |          |  |  |          |          |                          |  |            |            |   |  |          |         |  |  |            |          |  |  |            |          |                                |  |          |          |                  |  |          |          |                 |  |          |          |                               |  |         |         |                                     |  |          |          |  |  |         |         |  |  |          |          |  |  |          |          |  |  |          |          |   |  |          |          |   |  |                     |  |   |            |                                |  |                              |  |
| First Named Inventor   | <b>Noel R. Johnson</b>     |   |            |                            |                            |                 |                         |                      |                        |                                     |  |               |          |  |                   |          |          |                           |  |            |            |   |  |          |          |   |  |                                |            |   |  |          |         |   |  |          |          |  |  |          |          |   |  |            |          |  |  |           |           |   |  |          |          |                  |  |          |          |  |  |          |          |                          |  |            |            |   |  |          |         |  |  |            |          |  |  |            |          |                                |  |          |          |                  |  |          |          |                 |  |          |          |                               |  |         |         |                                     |  |          |          |  |  |         |         |  |  |          |          |  |  |          |          |  |  |          |          |   |  |          |          |   |  |                     |  |   |            |                                |  |                              |  |
| Group Art Unit   |                            |   |            |                            |                            |                 |                         |                      |                        |                                     |  |               |          |  |                   |          |          |                           |  |            |            |   |  |          |          |   |  |                                |            |   |  |          |         |   |  |          |          |  |  |          |          |   |  |            |          |  |  |           |           |   |  |          |          |                  |  |          |          |  |  |          |          |                          |  |            |            |   |  |          |         |  |  |            |          |  |  |            |          |                                |  |          |          |                  |  |          |          |                 |  |          |          |                               |  |         |         |                                     |  |          |          |  |  |         |         |  |  |          |          |  |  |          |          |  |  |          |          |   |  |          |          |   |  |                     |  |   |            |                                |  |                              |  |
| Examiner Name  |                            |   |            |                            |                            |                 |                         |                      |                        |                                     |  |               |          |  |                   |          |          |                           |  |            |            |   |  |          |          |   |  |                                |            |   |  |          |         |   |  |          |          |  |  |          |          |   |  |            |          |  |  |           |           |   |  |          |          |                  |  |          |          |  |  |          |          |                          |  |            |            |   |  |          |         |  |  |            |          |  |  |            |          |                                |  |          |          |                  |  |          |          |                 |  |          |          |                               |  |         |         |                                     |  |          |          |  |  |         |         |  |  |          |          |  |  |          |          |  |  |          |          |   |  |          |          |   |  |                     |  |   |            |                                |  |                              |  |
| Attorney Docket Number   | <b>4767-00046</b>          |   |            |                            |                            |                 |                         |                      |                        |                                     |  |               |          |  |                   |          |          |                           |  |            |            |   |  |          |          |   |  |                                |            |   |  |          |         |   |  |          |          |  |  |          |          |   |  |            |          |  |  |           |           |   |  |          |          |                  |  |          |          |  |  |          |          |                          |  |            |            |   |  |          |         |  |  |            |          |  |  |            |          |                                |  |          |          |                  |  |          |          |                 |  |          |          |                               |  |         |         |                                     |  |          |          |  |  |         |         |  |  |          |          |  |  |          |          |  |  |          |          |   |  |          |          |   |  |                     |  |   |            |                                |  |                              |  |
| <p><b>METHOD OF PAYMENT (check one)</b></p> <p>1. <input checked="" type="checkbox"/> The Commissioner is hereby authorized to charge indicated fees and credit any over payments to:</p> <p>Deposit Account Number <b>01.2000</b></p> <p>Account Deposit Name <b>ANDRUS, SCEALES, STARKE &amp; SAWALL, LLP</b></p> <p><input checked="" type="checkbox"/> Charge any additional fee required under 37 CFR 1.16 and 1.17</p> <p><input type="checkbox"/> The Commissioner is hereby authorized to charge the issue fee and any additional fees required under 37 C.F.R. 1.18 to the above Deposit Account.. A duplicate copy hereof is enclosed.</p> <p>2. <input type="checkbox"/> Payment Enclosed:</p> <p style="margin-left: 40px;"> <input type="checkbox"/> Check    <input type="checkbox"/> Money Order    <input type="checkbox"/> Other         </p> |                            | <p style="text-align: center;"><b>FEE CALCULATION (continued)</b></p> <table border="1" style="width: 100%; border-collapse: collapse;"> <thead> <tr> <th>Large Entity Fee Code (\$)</th> <th>Small Entity Fee Code (\$)</th> <th>Fee Description</th> <th>Fee Paid</th> </tr> </thead> <tbody> <tr><td>1051 130</td><td>2051 65</td><td>Surcharge - late filing fee or oath</td><td></td></tr> <tr><td>1052 50</td><td>2052 25</td><td>Surcharge - late provisional filing fee or cover sheet</td><td></td></tr> <tr><td>1053 130</td><td>1053 130</td><td>Non-English specification</td><td></td></tr> <tr><td>1812 2,520</td><td>1812 2,520</td><td>For filing a request for examination</td><td></td></tr> <tr><td>1804 920</td><td>1804 920</td><td>Requesting publication of SIR prior to Examiner action</td><td></td></tr> <tr><td>1805 1,840</td><td>1805 1,840</td><td>Requesting publication of SIR after Examiner action</td><td></td></tr> <tr><td>1251 110</td><td>2251 55</td><td>Extension for response within first month</td><td></td></tr> <tr><td>1252 420</td><td>2252 210</td><td>Extension for response within second month</td><td></td></tr> <tr><td>1253 950</td><td>2253 475</td><td>Extension for response within third month</td><td></td></tr> <tr><td>1254 1,480</td><td>2254 740</td><td>Extension for response within fourth month</td><td></td></tr> <tr><td>1255 2010</td><td>2255 1005</td><td>Extension for response within fifth month</td><td></td></tr> <tr><td>1401 330</td><td>2401 165</td><td>Notice of Appeal</td><td></td></tr> <tr><td>1402 330</td><td>2402 165</td><td>Filing a brief in support of an appeal</td><td></td></tr> <tr><td>1403 290</td><td>2403 145</td><td>Request for oral hearing</td><td></td></tr> <tr><td>1451 1,510</td><td>1451 1,510</td><td>Petition to institute a public use proceeding</td><td></td></tr> <tr><td>1452 110</td><td>2452 55</td><td>Petition to revive unavoidably abandoned application</td><td></td></tr> <tr><td>1453 1,330</td><td>2453 665</td><td>Petition to revive unintentionally abandoned application</td><td></td></tr> <tr><td>1501 1,330</td><td>2501 665</td><td>Utility issue fee (or reissue)</td><td></td></tr> <tr><td>1502 480</td><td>2502 240</td><td>Design issue fee</td><td></td></tr> <tr><td>1503 640</td><td>2503 320</td><td>Plant issue fee</td><td></td></tr> <tr><td>1460 130</td><td>1460 130</td><td>Petitions to the Commissioner</td><td></td></tr> <tr><td>1807 50</td><td>1807 50</td><td>Processing fee under 37 CFR 1.17(q)</td><td></td></tr> <tr><td>1806 180</td><td>1806 180</td><td>Submission of Information Disclos. Stmt.</td><td></td></tr> <tr><td>8021 40</td><td>8021 40</td><td>Recording each patent assignment per property (times number of properties)</td><td></td></tr> <tr><td>1809 770</td><td>2809 385</td><td>Filing a submission after final rejection (37 CFR 1.29(a))</td><td></td></tr> <tr><td>1810 770</td><td>2810 385</td><td>For each additional invention to be examined (37 CFR 1.129(b))</td><td></td></tr> <tr><td>1801 770</td><td>2801 385</td><td>Request for continued Examination (RCE)</td><td></td></tr> <tr><td>1802 900</td><td>1802 900</td><td>Request for expedited examination of a design application</td><td></td></tr> <tr> <td colspan="2">Other fee (specify)</td> <td>Transmission of Fees Under 37 CFR 1.28(c)</td> <td><b>775</b></td> </tr> <tr> <td colspan="2">SUBTOTAL (2) (\$ <b>0.00</b>)</td> <td colspan="2">SUBTOTAL (3) <b>\$775.00</b></td> </tr> </tbody> </table> |            | Large Entity Fee Code (\$) | Small Entity Fee Code (\$) | Fee Description | Fee Paid                | 1051 130             | 2051 65                | Surcharge - late filing fee or oath |  | 1052 50       | 2052 25  | Surcharge - late provisional filing fee or cover sheet |                   | 1053 130 | 1053 130 | Non-English specification |  | 1812 2,520 | 1812 2,520 | For filing a request for examination            |  | 1804 920 | 1804 920 | Requesting publication of SIR prior to Examiner action  |  | 1805 1,840                     | 1805 1,840 | Requesting publication of SIR after Examiner action |  | 1251 110 | 2251 55 | Extension for response within first month |  | 1252 420 | 2252 210 | Extension for response within second month |  | 1253 950 | 2253 475 | Extension for response within third month |  | 1254 1,480 | 2254 740 | Extension for response within fourth month |  | 1255 2010 | 2255 1005 | Extension for response within fifth month |  | 1401 330 | 2401 165 | Notice of Appeal |  | 1402 330 | 2402 165 | Filing a brief in support of an appeal |  | 1403 290 | 2403 145 | Request for oral hearing |  | 1451 1,510 | 1451 1,510 | Petition to institute a public use proceeding |  | 1452 110 | 2452 55 | Petition to revive unavoidably abandoned application |  | 1453 1,330 | 2453 665 | Petition to revive unintentionally abandoned application |  | 1501 1,330 | 2501 665 | Utility issue fee (or reissue) |  | 1502 480 | 2502 240 | Design issue fee |  | 1503 640 | 2503 320 | Plant issue fee |  | 1460 130 | 1460 130 | Petitions to the Commissioner |  | 1807 50 | 1807 50 | Processing fee under 37 CFR 1.17(q) |  | 1806 180 | 1806 180 | Submission of Information Disclos. Stmt. |  | 8021 40 | 8021 40 | Recording each patent assignment per property (times number of properties) |  | 1809 770 | 2809 385 | Filing a submission after final rejection (37 CFR 1.29(a)) |  | 1810 770 | 2810 385 | For each additional invention to be examined (37 CFR 1.129(b)) |  | 1801 770 | 2801 385 | Request for continued Examination (RCE) |  | 1802 900 | 1802 900 | Request for expedited examination of a design application |  | Other fee (specify) |  | Transmission of Fees Under 37 CFR 1.28(c) | <b>775</b> | SUBTOTAL (2) (\$ <b>0.00</b> ) |  | SUBTOTAL (3) <b>\$775.00</b> |  |
| Large Entity Fee Code (\$)   | Small Entity Fee Code (\$) | Fee Description   | Fee Paid   |                            |                            |                 |                         |                      |                        |                                     |  |               |          |  |                   |          |          |                           |  |            |            |   |  |          |          |   |  |                                |            |   |  |          |         |   |  |          |          |  |  |          |          |   |  |            |          |  |  |           |           |   |  |          |          |                  |  |          |          |  |  |          |          |                          |  |            |            |   |  |          |         |  |  |            |          |  |  |            |          |                                |  |          |          |                  |  |          |          |                 |  |          |          |                               |  |         |         |                                     |  |          |          |  |  |         |         |  |  |          |          |  |  |          |          |  |  |          |          |   |  |          |          |   |  |                     |  |   |            |                                |  |                              |  |
| 1051 130   | 2051 65                    | Surcharge - late filing fee or oath   |            |                            |                            |                 |                         |                      |                        |                                     |  |               |          |  |                   |          |          |                           |  |            |            |   |  |          |          |   |  |                                |            |   |  |          |         |   |  |          |          |  |  |          |          |   |  |            |          |  |  |           |           |   |  |          |          |                  |  |          |          |  |  |          |          |                          |  |            |            |   |  |          |         |  |  |            |          |  |  |            |          |                                |  |          |          |                  |  |          |          |                 |  |          |          |                               |  |         |         |                                     |  |          |          |  |  |         |         |  |  |          |          |  |  |          |          |  |  |          |          |   |  |          |          |   |  |                     |  |   |            |                                |  |                              |  |
| 1052 50  | 2052 25                    | Surcharge - late provisional filing fee or cover sheet  |            |                            |                            |                 |                         |                      |                        |                                     |  |               |          |  |                   |          |          |                           |  |            |            |   |  |          |          |   |  |                                |            |   |  |          |         |   |  |          |          |  |  |          |          |   |  |            |          |  |  |           |           |   |  |          |          |                  |  |          |          |  |  |          |          |                          |  |            |            |   |  |          |         |  |  |            |          |  |  |            |          |                                |  |          |          |                  |  |          |          |                 |  |          |          |                               |  |         |         |                                     |  |          |          |  |  |         |         |  |  |          |          |  |  |          |          |  |  |          |          |   |  |          |          |   |  |                     |  |   |            |                                |  |                              |  |
| 1053 130   | 1053 130                   | Non-English specification   |            |                            |                            |                 |                         |                      |                        |                                     |  |               |          |  |                   |          |          |                           |  |            |            |   |  |          |          |   |  |                                |            |   |  |          |         |   |  |          |          |  |  |          |          |   |  |            |          |  |  |           |           |   |  |          |          |                  |  |          |          |  |  |          |          |                          |  |            |            |   |  |          |         |  |  |            |          |  |  |            |          |                                |  |          |          |                  |  |          |          |                 |  |          |          |                               |  |         |         |                                     |  |          |          |  |  |         |         |  |  |          |          |  |  |          |          |  |  |          |          |   |  |          |          |   |  |                     |  |   |            |                                |  |                              |  |
| 1812 2,520   | 1812 2,520                 | For filing a request for examination  |            |                            |                            |                 |                         |                      |                        |                                     |  |               |          |  |                   |          |          |                           |  |            |            |   |  |          |          |   |  |                                |            |   |  |          |         |   |  |          |          |  |  |          |          |   |  |            |          |  |  |           |           |   |  |          |          |                  |  |          |          |  |  |          |          |                          |  |            |            |   |  |          |         |  |  |            |          |  |  |            |          |                                |  |          |          |                  |  |          |          |                 |  |          |          |                               |  |         |         |                                     |  |          |          |  |  |         |         |  |  |          |          |  |  |          |          |  |  |          |          |   |  |          |          |   |  |                     |  |   |            |                                |  |                              |  |
| 1804 920   | 1804 920                   | Requesting publication of SIR prior to Examiner action  |            |                            |                            |                 |                         |                      |                        |                                     |  |               |          |  |                   |          |          |                           |  |            |            |   |  |          |          |   |  |                                |            |   |  |          |         |   |  |          |          |  |  |          |          |   |  |            |          |  |  |           |           |   |  |          |          |                  |  |          |          |  |  |          |          |                          |  |            |            |   |  |          |         |  |  |            |          |  |  |            |          |                                |  |          |          |                  |  |          |          |                 |  |          |          |                               |  |         |         |                                     |  |          |          |  |  |         |         |  |  |          |          |  |  |          |          |  |  |          |          |   |  |          |          |   |  |                     |  |   |            |                                |  |                              |  |
| 1805 1,840   | 1805 1,840                 | Requesting publication of SIR after Examiner action   |            |                            |                            |                 |                         |                      |                        |                                     |  |               |          |  |                   |          |          |                           |  |            |            |   |  |          |          |   |  |                                |            |   |  |          |         |   |  |          |          |  |  |          |          |   |  |            |          |  |  |           |           |   |  |          |          |                  |  |          |          |  |  |          |          |                          |  |            |            |   |  |          |         |  |  |            |          |  |  |            |          |                                |  |          |          |                  |  |          |          |                 |  |          |          |                               |  |         |         |                                     |  |          |          |  |  |         |         |  |  |          |          |  |  |          |          |  |  |          |          |   |  |          |          |   |  |                     |  |   |            |                                |  |                              |  |
| 1251 110   | 2251 55                    | Extension for response within first month   |            |                            |                            |                 |                         |                      |                        |                                     |  |               |          |  |                   |          |          |                           |  |            |            |   |  |          |          |   |  |                                |            |   |  |          |         |   |  |          |          |  |  |          |          |   |  |            |          |  |  |           |           |   |  |          |          |                  |  |          |          |  |  |          |          |                          |  |            |            |   |  |          |         |  |  |            |          |  |  |            |          |                                |  |          |          |                  |  |          |          |                 |  |          |          |                               |  |         |         |                                     |  |          |          |  |  |         |         |  |  |          |          |  |  |          |          |  |  |          |          |   |  |          |          |   |  |                     |  |   |            |                                |  |                              |  |
| 1252 420   | 2252 210                   | Extension for response within second month  |            |                            |                            |                 |                         |                      |                        |                                     |  |               |          |  |                   |          |          |                           |  |            |            |   |  |          |          |   |  |                                |            |   |  |          |         |   |  |          |          |  |  |          |          |   |  |            |          |  |  |           |           |   |  |          |          |                  |  |          |          |  |  |          |          |                          |  |            |            |   |  |          |         |  |  |            |          |  |  |            |          |                                |  |          |          |                  |  |          |          |                 |  |          |          |                               |  |         |         |                                     |  |          |          |  |  |         |         |  |  |          |          |  |  |          |          |  |  |          |          |   |  |          |          |   |  |                     |  |   |            |                                |  |                              |  |
| 1253 950   | 2253 475                   | Extension for response within third month   |            |                            |                            |                 |                         |                      |                        |                                     |  |               |          |  |                   |          |          |                           |  |            |            |   |  |          |          |   |  |                                |            |   |  |          |         |   |  |          |          |  |  |          |          |   |  |            |          |  |  |           |           |   |  |          |          |                  |  |          |          |  |  |          |          |                          |  |            |            |   |  |          |         |  |  |            |          |  |  |            |          |                                |  |          |          |                  |  |          |          |                 |  |          |          |                               |  |         |         |                                     |  |          |          |  |  |         |         |  |  |          |          |  |  |          |          |  |  |          |          |   |  |          |          |   |  |                     |  |   |            |                                |  |                              |  |
| 1254 1,480   | 2254 740                   | Extension for response within fourth month  |            |                            |                            |                 |                         |                      |                        |                                     |  |               |          |  |                   |          |          |                           |  |            |            |   |  |          |          |   |  |                                |            |   |  |          |         |   |  |          |          |  |  |          |          |   |  |            |          |  |  |           |           |   |  |          |          |                  |  |          |          |  |  |          |          |                          |  |            |            |   |  |          |         |  |  |            |          |  |  |            |          |                                |  |          |          |                  |  |          |          |                 |  |          |          |                               |  |         |         |                                     |  |          |          |  |  |         |         |  |  |          |          |  |  |          |          |  |  |          |          |   |  |          |          |   |  |                     |  |   |            |                                |  |                              |  |
| 1255 2010  | 2255 1005                  | Extension for response within fifth month   |            |                            |                            |                 |                         |                      |                        |                                     |  |               |          |  |                   |          |          |                           |  |            |            |   |  |          |          |   |  |                                |            |   |  |          |         |   |  |          |          |  |  |          |          |   |  |            |          |  |  |           |           |   |  |          |          |                  |  |          |          |  |  |          |          |                          |  |            |            |   |  |          |         |  |  |            |          |  |  |            |          |                                |  |          |          |                  |  |          |          |                 |  |          |          |                               |  |         |         |                                     |  |          |          |  |  |         |         |  |  |          |          |  |  |          |          |  |  |          |          |   |  |          |          |   |  |                     |  |   |            |                                |  |                              |  |
| 1401 330   | 2401 165                   | Notice of Appeal  |            |                            |                            |                 |                         |                      |                        |                                     |  |               |          |  |                   |          |          |                           |  |            |            |   |  |          |          |   |  |                                |            |   |  |          |         |   |  |          |          |  |  |          |          |   |  |            |          |  |  |           |           |   |  |          |          |                  |  |          |          |  |  |          |          |                          |  |            |            |   |  |          |         |  |  |            |          |  |  |            |          |                                |  |          |          |                  |  |          |          |                 |  |          |          |                               |  |         |         |                                     |  |          |          |  |  |         |         |  |  |          |          |  |  |          |          |  |  |          |          |   |  |          |          |   |  |                     |  |   |            |                                |  |                              |  |
| 1402 330   | 2402 165                   | Filing a brief in support of an appeal  |            |                            |                            |                 |                         |                      |                        |                                     |  |               |          |  |                   |          |          |                           |  |            |            |   |  |          |          |   |  |                                |            |   |  |          |         |   |  |          |          |  |  |          |          |   |  |            |          |  |  |           |           |   |  |          |          |                  |  |          |          |  |  |          |          |                          |  |            |            |   |  |          |         |  |  |            |          |  |  |            |          |                                |  |          |          |                  |  |          |          |                 |  |          |          |                               |  |         |         |                                     |  |          |          |  |  |         |         |  |  |          |          |  |  |          |          |  |  |          |          |   |  |          |          |   |  |                     |  |   |            |                                |  |                              |  |
| 1403 290   | 2403 145                   | Request for oral hearing  |            |                            |                            |                 |                         |                      |                        |                                     |  |               |          |  |                   |          |          |                           |  |            |            |   |  |          |          |   |  |                                |            |   |  |          |         |   |  |          |          |  |  |          |          |   |  |            |          |  |  |           |           |   |  |          |          |                  |  |          |          |  |  |          |          |                          |  |            |            |   |  |          |         |  |  |            |          |  |  |            |          |                                |  |          |          |                  |  |          |          |                 |  |          |          |                               |  |         |         |                                     |  |          |          |  |  |         |         |  |  |          |          |  |  |          |          |  |  |          |          |   |  |          |          |   |  |                     |  |   |            |                                |  |                              |  |
| 1451 1,510   | 1451 1,510                 | Petition to institute a public use proceeding   |            |                            |                            |                 |                         |                      |                        |                                     |  |               |          |  |                   |          |          |                           |  |            |            |   |  |          |          |   |  |                                |            |   |  |          |         |   |  |          |          |  |  |          |          |   |  |            |          |  |  |           |           |   |  |          |          |                  |  |          |          |  |  |          |          |                          |  |            |            |   |  |          |         |  |  |            |          |  |  |            |          |                                |  |          |          |                  |  |          |          |                 |  |          |          |                               |  |         |         |                                     |  |          |          |  |  |         |         |  |  |          |          |  |  |          |          |  |  |          |          |   |  |          |          |   |  |                     |  |   |            |                                |  |                              |  |
| 1452 110   | 2452 55                    | Petition to revive unavoidably abandoned application  |            |                            |                            |                 |                         |                      |                        |                                     |  |               |          |  |                   |          |          |                           |  |            |            |   |  |          |          |   |  |                                |            |   |  |          |         |   |  |          |          |  |  |          |          |   |  |            |          |  |  |           |           |   |  |          |          |                  |  |          |          |  |  |          |          |                          |  |            |            |   |  |          |         |  |  |            |          |  |  |            |          |                                |  |          |          |                  |  |          |          |                 |  |          |          |                               |  |         |         |                                     |  |          |          |  |  |         |         |  |  |          |          |  |  |          |          |  |  |          |          |   |  |          |          |   |  |                     |  |   |            |                                |  |                              |  |
| 1453 1,330   | 2453 665                   | Petition to revive unintentionally abandoned application  |            |                            |                            |                 |                         |                      |                        |                                     |  |               |          |  |                   |          |          |                           |  |            |            |   |  |          |          |   |  |                                |            |   |  |          |         |   |  |          |          |  |  |          |          |   |  |            |          |  |  |           |           |   |  |          |          |                  |  |          |          |  |  |          |          |                          |  |            |            |   |  |          |         |  |  |            |          |  |  |            |          |                                |  |          |          |                  |  |          |          |                 |  |          |          |                               |  |         |         |                                     |  |          |          |  |  |         |         |  |  |          |          |  |  |          |          |  |  |          |          |   |  |          |          |   |  |                     |  |   |            |                                |  |                              |  |
| 1501 1,330   | 2501 665                   | Utility issue fee (or reissue)  |            |                            |                            |                 |                         |                      |                        |                                     |  |               |          |  |                   |          |          |                           |  |            |            |   |  |          |          |   |  |                                |            |   |  |          |         |   |  |          |          |  |  |          |          |   |  |            |          |  |  |           |           |   |  |          |          |                  |  |          |          |  |  |          |          |                          |  |            |            |   |  |          |         |  |  |            |          |  |  |            |          |                                |  |          |          |                  |  |          |          |                 |  |          |          |                               |  |         |         |                                     |  |          |          |  |  |         |         |  |  |          |          |  |  |          |          |  |  |          |          |   |  |          |          |   |  |                     |  |   |            |                                |  |                              |  |
| 1502 480   | 2502 240                   | Design issue fee  |            |                            |                            |                 |                         |                      |                        |                                     |  |               |          |  |                   |          |          |                           |  |            |            |   |  |          |          |   |  |                                |            |   |  |          |         |   |  |          |          |  |  |          |          |   |  |            |          |  |  |           |           |   |  |          |          |                  |  |          |          |  |  |          |          |                          |  |            |            |   |  |          |         |  |  |            |          |  |  |            |          |                                |  |          |          |                  |  |          |          |                 |  |          |          |                               |  |         |         |                                     |  |          |          |  |  |         |         |  |  |          |          |  |  |          |          |  |  |          |          |   |  |          |          |   |  |                     |  |   |            |                                |  |                              |  |
| 1503 640   | 2503 320                   | Plant issue fee   |            |                            |                            |                 |                         |                      |                        |                                     |  |               |          |  |                   |          |          |                           |  |            |            |   |  |          |          |   |  |                                |            |   |  |          |         |   |  |          |          |  |  |          |          |   |  |            |          |  |  |           |           |   |  |          |          |                  |  |          |          |  |  |          |          |                          |  |            |            |   |  |          |         |  |  |            |          |  |  |            |          |                                |  |          |          |                  |  |          |          |                 |  |          |          |                               |  |         |         |                                     |  |          |          |  |  |         |         |  |  |          |          |  |  |          |          |  |  |          |          |   |  |          |          |   |  |                     |  |   |            |                                |  |                              |  |
| 1460 130   | 1460 130                   | Petitions to the Commissioner   |            |                            |                            |                 |                         |                      |                        |                                     |  |               |          |  |                   |          |          |                           |  |            |            |   |  |          |          |   |  |                                |            |   |  |          |         |   |  |          |          |  |  |          |          |   |  |            |          |  |  |           |           |   |  |          |          |                  |  |          |          |  |  |          |          |                          |  |            |            |   |  |          |         |  |  |            |          |  |  |            |          |                                |  |          |          |                  |  |          |          |                 |  |          |          |                               |  |         |         |                                     |  |          |          |  |  |         |         |  |  |          |          |  |  |          |          |  |  |          |          |   |  |          |          |   |  |                     |  |   |            |                                |  |                              |  |
| 1807 50  | 1807 50                    | Processing fee under 37 CFR 1.17(q)   |            |                            |                            |                 |                         |                      |                        |                                     |  |               |          |  |                   |          |          |                           |  |            |            |   |  |          |          |   |  |                                |            |   |  |          |         |   |  |          |          |  |  |          |          |   |  |            |          |  |  |           |           |   |  |          |          |                  |  |          |          |  |  |          |          |                          |  |            |            |   |  |          |         |  |  |            |          |  |  |            |          |                                |  |          |          |                  |  |          |          |                 |  |          |          |                               |  |         |         |                                     |  |          |          |  |  |         |         |  |  |          |          |  |  |          |          |  |  |          |          |   |  |          |          |   |  |                     |  |   |            |                                |  |                              |  |
| 1806 180   | 1806 180                   | Submission of Information Disclos. Stmt.  |            |                            |                            |                 |                         |                      |                        |                                     |  |               |          |  |                   |          |          |                           |  |            |            |   |  |          |          |   |  |                                |            |   |  |          |         |   |  |          |          |  |  |          |          |   |  |            |          |  |  |           |           |   |  |          |          |                  |  |          |          |  |  |          |          |                          |  |            |            |   |  |          |         |  |  |            |          |  |  |            |          |                                |  |          |          |                  |  |          |          |                 |  |          |          |                               |  |         |         |                                     |  |          |          |  |  |         |         |  |  |          |          |  |  |          |          |  |  |          |          |   |  |          |          |   |  |                     |  |   |            |                                |  |                              |  |
| 8021 40  | 8021 40                    | Recording each patent assignment per property (times number of properties)  |            |                            |                            |                 |                         |                      |                        |                                     |  |               |          |  |                   |          |          |                           |  |            |            |   |  |          |          |   |  |                                |            |   |  |          |         |   |  |          |          |  |  |          |          |   |  |            |          |  |  |           |           |   |  |          |          |                  |  |          |          |  |  |          |          |                          |  |            |            |   |  |          |         |  |  |            |          |  |  |            |          |                                |  |          |          |                  |  |          |          |                 |  |          |          |                               |  |         |         |                                     |  |          |          |  |  |         |         |  |  |          |          |  |  |          |          |  |  |          |          |   |  |          |          |   |  |                     |  |   |            |                                |  |                              |  |
| 1809 770   | 2809 385                   | Filing a submission after final rejection (37 CFR 1.29(a))  |            |                            |                            |                 |                         |                      |                        |                                     |  |               |          |  |                   |          |          |                           |  |            |            |   |  |          |          |   |  |                                |            |   |  |          |         |   |  |          |          |  |  |          |          |   |  |            |          |  |  |           |           |   |  |          |          |                  |  |          |          |  |  |          |          |                          |  |            |            |   |  |          |         |  |  |            |          |  |  |            |          |                                |  |          |          |                  |  |          |          |                 |  |          |          |                               |  |         |         |                                     |  |          |          |  |  |         |         |  |  |          |          |  |  |          |          |  |  |          |          |   |  |          |          |   |  |                     |  |   |            |                                |  |                              |  |
| 1810 770   | 2810 385                   | For each additional invention to be examined (37 CFR 1.129(b))  |            |                            |                            |                 |                         |                      |                        |                                     |  |               |          |  |                   |          |          |                           |  |            |            |   |  |          |          |   |  |                                |            |   |  |          |         |   |  |          |          |  |  |          |          |   |  |            |          |  |  |           |           |   |  |          |          |                  |  |          |          |  |  |          |          |                          |  |            |            |   |  |          |         |  |  |            |          |  |  |            |          |                                |  |          |          |                  |  |          |          |                 |  |          |          |                               |  |         |         |                                     |  |          |          |  |  |         |         |  |  |          |          |  |  |          |          |  |  |          |          |   |  |          |          |   |  |                     |  |   |            |                                |  |                              |  |
| 1801 770   | 2801 385                   | Request for continued Examination (RCE)   |            |                            |                            |                 |                         |                      |                        |                                     |  |               |          |  |                   |          |          |                           |  |            |            |   |  |          |          |   |  |                                |            |   |  |          |         |   |  |          |          |  |  |          |          |   |  |            |          |  |  |           |           |   |  |          |          |                  |  |          |          |  |  |          |          |                          |  |            |            |   |  |          |         |  |  |            |          |  |  |            |          |                                |  |          |          |                  |  |          |          |                 |  |          |          |                               |  |         |         |                                     |  |          |          |  |  |         |         |  |  |          |          |  |  |          |          |  |  |          |          |   |  |          |          |   |  |                     |  |   |            |                                |  |                              |  |
| 1802 900   | 1802 900                   | Request for expedited examination of a design application   |            |                            |                            |                 |                         |                      |                        |                                     |  |               |          |  |                   |          |          |                           |  |            |            |   |  |          |          |   |  |                                |            |   |  |          |         |   |  |          |          |  |  |          |          |   |  |            |          |  |  |           |           |   |  |          |          |                  |  |          |          |  |  |          |          |                          |  |            |            |   |  |          |         |  |  |            |          |  |  |            |          |                                |  |          |          |                  |  |          |          |                 |  |          |          |                               |  |         |         |                                     |  |          |          |  |  |         |         |  |  |          |          |  |  |          |          |  |  |          |          |   |  |          |          |   |  |                     |  |   |            |                                |  |                              |  |
| Other fee (specify)  |                            | Transmission of Fees Under 37 CFR 1.28(c)   | <b>775</b> |                            |                            |                 |                         |                      |                        |                                     |  |               |          |  |                   |          |          |                           |  |            |            |   |  |          |          |   |  |                                |            |   |  |          |         |   |  |          |          |  |  |          |          |   |  |            |          |  |  |           |           |   |  |          |          |                  |  |          |          |  |  |          |          |                          |  |            |            |   |  |          |         |  |  |            |          |  |  |            |          |                                |  |          |          |                  |  |          |          |                 |  |          |          |                               |  |         |         |                                     |  |          |          |  |  |         |         |  |  |          |          |  |  |          |          |  |  |          |          |   |  |          |          |   |  |                     |  |   |            |                                |  |                              |  |
| SUBTOTAL (2) (\$ <b>0.00</b> )   |                            | SUBTOTAL (3) <b>\$775.00</b>  |            |                            |                            |                 |                         |                      |                        |                                     |  |               |          |  |                   |          |          |                           |  |            |            |   |  |          |          |   |  |                                |            |   |  |          |         |   |  |          |          |  |  |          |          |   |  |            |          |  |  |           |           |   |  |          |          |                  |  |          |          |  |  |          |          |                          |  |            |            |   |  |          |         |  |  |            |          |  |  |            |          |                                |  |          |          |                  |  |          |          |                 |  |          |          |                               |  |         |         |                                     |  |          |          |  |  |         |         |  |  |          |          |  |  |          |          |  |  |          |          |   |  |          |          |   |  |                     |  |   |            |                                |  |                              |  |
| <p><b>1. FILING FEE</b></p> <table border="1" style="width: 100%; border-collapse: collapse;"> <thead> <tr> <th>Large Entity Fee Code (\$)</th> <th>Small Entity Fee Code (\$)</th> <th>Fee Description</th> <th>Fee Paid</th> </tr> </thead> <tbody> <tr><td>1001 770</td><td>2001 385</td><td>Utility filing fee</td><td></td></tr> <tr><td>1002 340</td><td>2002 170</td><td>Design filing fee</td><td></td></tr> <tr><td>1003 530</td><td>2003 265</td><td>Plant filing fee</td><td></td></tr> <tr><td>1004 770</td><td>2004 385</td><td>Reissue filing fee</td><td></td></tr> <tr><td>1005 160</td><td>2005 80</td><td>Provisional filing fee</td><td></td></tr> <tr> <td colspan="2">SUBTOTAL (1) (\$)</td> <td></td> <td></td> </tr> </tbody> </table>  |                            |   |            | Large Entity Fee Code (\$) | Small Entity Fee Code (\$) | Fee Description | Fee Paid                | 1001 770             | 2001 385               | Utility filing fee                  |  | 1002 340      | 2002 170 | Design filing fee                                      |                   | 1003 530 | 2003 265 | Plant filing fee          |  | 1004 770   | 2004 385   | Reissue filing fee                              |  | 1005 160 | 2005 80  | Provisional filing fee                                  |  | SUBTOTAL (1) (\$)              |            |   |  |          |         |   |  |          |          |  |  |          |          |   |  |            |          |  |  |           |           |   |  |          |          |                  |  |          |          |  |  |          |          |                          |  |            |            |   |  |          |         |  |  |            |          |  |  |            |          |                                |  |          |          |                  |  |          |          |                 |  |          |          |                               |  |         |         |                                     |  |          |          |  |  |         |         |  |  |          |          |  |  |          |          |  |  |          |          |   |  |          |          |   |  |                     |  |   |            |                                |  |                              |  |
| Large Entity Fee Code (\$)   | Small Entity Fee Code (\$) | Fee Description   | Fee Paid   |                            |                            |                 |                         |                      |                        |                                     |  |               |          |  |                   |          |          |                           |  |            |            |   |  |          |          |   |  |                                |            |   |  |          |         |   |  |          |          |  |  |          |          |   |  |            |          |  |  |           |           |   |  |          |          |                  |  |          |          |  |  |          |          |                          |  |            |            |   |  |          |         |  |  |            |          |  |  |            |          |                                |  |          |          |                  |  |          |          |                 |  |          |          |                               |  |         |         |                                     |  |          |          |  |  |         |         |  |  |          |          |  |  |          |          |  |  |          |          |   |  |          |          |   |  |                     |  |   |            |                                |  |                              |  |
| 1001 770   | 2001 385                   | Utility filing fee  |            |                            |                            |                 |                         |                      |                        |                                     |  |               |          |  |                   |          |          |                           |  |            |            |   |  |          |          |   |  |                                |            |   |  |          |         |   |  |          |          |  |  |          |          |   |  |            |          |  |  |           |           |   |  |          |          |                  |  |          |          |  |  |          |          |                          |  |            |            |   |  |          |         |  |  |            |          |  |  |            |          |                                |  |          |          |                  |  |          |          |                 |  |          |          |                               |  |         |         |                                     |  |          |          |  |  |         |         |  |  |          |          |  |  |          |          |  |  |          |          |   |  |          |          |   |  |                     |  |   |            |                                |  |                              |  |
| 1002 340   | 2002 170                   | Design filing fee   |            |                            |                            |                 |                         |                      |                        |                                     |  |               |          |  |                   |          |          |                           |  |            |            |   |  |          |          |   |  |                                |            |   |  |          |         |   |  |          |          |  |  |          |          |   |  |            |          |  |  |           |           |   |  |          |          |                  |  |          |          |  |  |          |          |                          |  |            |            |   |  |          |         |  |  |            |          |  |  |            |          |                                |  |          |          |                  |  |          |          |                 |  |          |          |                               |  |         |         |                                     |  |          |          |  |  |         |         |  |  |          |          |  |  |          |          |  |  |          |          |   |  |          |          |   |  |                     |  |   |            |                                |  |                              |  |
| 1003 530   | 2003 265                   | Plant filing fee  |            |                            |                            |                 |                         |                      |                        |                                     |  |               |          |  |                   |          |          |                           |  |            |            |   |  |          |          |   |  |                                |            |   |  |          |         |   |  |          |          |  |  |          |          |   |  |            |          |  |  |           |           |   |  |          |          |                  |  |          |          |  |  |          |          |                          |  |            |            |   |  |          |         |  |  |            |          |  |  |            |          |                                |  |          |          |                  |  |          |          |                 |  |          |          |                               |  |         |         |                                     |  |          |          |  |  |         |         |  |  |          |          |  |  |          |          |  |  |          |          |   |  |          |          |   |  |                     |  |   |            |                                |  |                              |  |
| 1004 770   | 2004 385                   | Reissue filing fee  |            |                            |                            |                 |                         |                      |                        |                                     |  |               |          |  |                   |          |          |                           |  |            |            |   |  |          |          |   |  |                                |            |   |  |          |         |   |  |          |          |  |  |          |          |   |  |            |          |  |  |           |           |   |  |          |          |                  |  |          |          |  |  |          |          |                          |  |            |            |   |  |          |         |  |  |            |          |  |  |            |          |                                |  |          |          |                  |  |          |          |                 |  |          |          |                               |  |         |         |                                     |  |          |          |  |  |         |         |  |  |          |          |  |  |          |          |  |  |          |          |   |  |          |          |   |  |                     |  |   |            |                                |  |                              |  |
| 1005 160   | 2005 80                    | Provisional filing fee  |            |                            |                            |                 |                         |                      |                        |                                     |  |               |          |  |                   |          |          |                           |  |            |            |   |  |          |          |   |  |                                |            |   |  |          |         |   |  |          |          |  |  |          |          |   |  |            |          |  |  |           |           |   |  |          |          |                  |  |          |          |  |  |          |          |                          |  |            |            |   |  |          |         |  |  |            |          |  |  |            |          |                                |  |          |          |                  |  |          |          |                 |  |          |          |                               |  |         |         |                                     |  |          |          |  |  |         |         |  |  |          |          |  |  |          |          |  |  |          |          |   |  |          |          |   |  |                     |  |   |            |                                |  |                              |  |
| SUBTOTAL (1) (\$)  |                            |   |            |                            |                            |                 |                         |                      |                        |                                     |  |               |          |  |                   |          |          |                           |  |            |            |   |  |          |          |   |  |                                |            |   |  |          |         |   |  |          |          |  |  |          |          |   |  |            |          |  |  |           |           |   |  |          |          |                  |  |          |          |  |  |          |          |                          |  |            |            |   |  |          |         |  |  |            |          |  |  |            |          |                                |  |          |          |                  |  |          |          |                 |  |          |          |                               |  |         |         |                                     |  |          |          |  |  |         |         |  |  |          |          |  |  |          |          |  |  |          |          |   |  |          |          |   |  |                     |  |   |            |                                |  |                              |  |
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| 1202 18  | 2202 9                     | Claims in excess of 20  |            |                            |                            |                 |                         |                      |                        |                                     |  |               |          |  |                   |          |          |                           |  |            |            |   |  |          |          |   |  |                                |            |   |  |          |         |   |  |          |          |  |  |          |          |   |  |            |          |  |  |           |           |   |  |          |          |                  |  |          |          |  |  |          |          |                          |  |            |            |   |  |          |         |  |  |            |          |  |  |            |          |                                |  |          |          |                  |  |          |          |                 |  |          |          |                               |  |         |         |                                     |  |          |          |  |  |         |         |  |  |          |          |  |  |          |          |  |  |          |          |   |  |          |          |   |  |                     |  |   |            |                                |  |                              |  |
| 1201 86  | 2001 43                    | Independent claims in excess of 3   |            |                            |                            |                 |                         |                      |                        |                                     |  |               |          |  |                   |          |          |                           |  |            |            |   |  |          |          |   |  |                                |            |   |  |          |         |   |  |          |          |  |  |          |          |   |  |            |          |  |  |           |           |   |  |          |          |                  |  |          |          |  |  |          |          |                          |  |            |            |   |  |          |         |  |  |            |          |  |  |            |          |                                |  |          |          |                  |  |          |          |                 |  |          |          |                               |  |         |         |                                     |  |          |          |  |  |         |         |  |  |          |          |  |  |          |          |  |  |          |          |   |  |          |          |   |  |                     |  |   |            |                                |  |                              |  |
| 1203 290   | 2003 145                   | Multiple dependent claim  |            |                            |                            |                 |                         |                      |                        |                                     |  |               |          |  |                   |          |          |                           |  |            |            |   |  |          |          |   |  |                                |            |   |  |          |         |   |  |          |          |  |  |          |          |   |  |            |          |  |  |           |           |   |  |          |          |                  |  |          |          |  |  |          |          |                          |  |            |            |   |  |          |         |  |  |            |          |  |  |            |          |                                |  |          |          |                  |  |          |          |                 |  |          |          |                               |  |         |         |                                     |  |          |          |  |  |         |         |  |  |          |          |  |  |          |          |  |  |          |          |   |  |          |          |   |  |                     |  |   |            |                                |  |                              |  |
| 1204 86  | 2004 43                    | Reissue independent claims over original patent   |            |                            |                            |                 |                         |                      |                        |                                     |  |               |          |  |                   |          |          |                           |  |            |            |   |  |          |          |   |  |                                |            |   |  |          |         |   |  |          |          |  |  |          |          |   |  |            |          |  |  |           |           |   |  |          |          |                  |  |          |          |  |  |          |          |                          |  |            |            |   |  |          |         |  |  |            |          |  |  |            |          |                                |  |          |          |                  |  |          |          |                 |  |          |          |                               |  |         |         |                                     |  |          |          |  |  |         |         |  |  |          |          |  |  |          |          |  |  |          |          |   |  |          |          |   |  |                     |  |   |            |                                |  |                              |  |
| 1205 18  | 2205 9                     | Reissue claims in excess of 20 and over original patent   |            |                            |                            |                 |                         |                      |                        |                                     |  |               |          |  |                   |          |          |                           |  |            |            |   |  |          |          |   |  |                                |            |   |  |          |         |   |  |          |          |  |  |          |          |   |  |            |          |  |  |           |           |   |  |          |          |                  |  |          |          |  |  |          |          |                          |  |            |            |   |  |          |         |  |  |            |          |  |  |            |          |                                |  |          |          |                  |  |          |          |                 |  |          |          |                               |  |         |         |                                     |  |          |          |  |  |         |         |  |  |          |          |  |  |          |          |  |  |          |          |   |  |          |          |   |  |                     |  |   |            |                                |  |                              |  |
| SUBTOTAL (2) (\$ <b>0.00</b> )   |                            |   |            |                            |                            |                 |                         |                      |                        |                                     |  |               |          |  |                   |          |          |                           |  |            |            |   |  |          |          |   |  |                                |            |   |  |          |         |   |  |          |          |  |  |          |          |   |  |            |          |  |  |           |           |   |  |          |          |                  |  |          |          |  |  |          |          |                          |  |            |            |   |  |          |         |  |  |            |          |  |  |            |          |                                |  |          |          |                  |  |          |          |                 |  |          |          |                               |  |         |         |                                     |  |          |          |  |  |         |         |  |  |          |          |  |  |          |          |  |  |          |          |   |  |          |          |   |  |                     |  |   |            |                                |  |                              |  |
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| 1202 18  | 2202 9                     | Claims in excess of 20  |            |                            |                            |                 |                         |                      |                        |                                     |  |               |          |  |                   |          |          |                           |  |            |            |   |  |          |          |   |  |                                |            |   |  |          |         |   |  |          |          |  |  |          |          |   |  |            |          |  |  |           |           |   |  |          |          |                  |  |          |          |  |  |          |          |                          |  |            |            |   |  |          |         |  |  |            |          |  |  |            |          |                                |  |          |          |                  |  |          |          |                 |  |          |          |                               |  |         |         |                                     |  |          |          |  |  |         |         |  |  |          |          |  |  |          |          |  |  |          |          |   |  |          |          |   |  |                     |  |   |            |                                |  |                              |  |
| 1201 86  | 2001 43                    | Independent claims in excess of 3   |            |                            |                            |                 |                         |                      |                        |                                     |  |               |          |  |                   |          |          |                           |  |            |            |   |  |          |          |   |  |                                |            |   |  |          |         |   |  |          |          |  |  |          |          |   |  |            |          |  |  |           |           |   |  |          |          |                  |  |          |          |  |  |          |          |                          |  |            |            |   |  |          |         |  |  |            |          |  |  |            |          |                                |  |          |          |                  |  |          |          |                 |  |          |          |                               |  |         |         |                                     |  |          |          |  |  |         |         |  |  |          |          |  |  |          |          |  |  |          |          |   |  |          |          |   |  |                     |  |   |            |                                |  |                              |  |
| 1203 290   | 2003 145                   | Multiple dependent claim  |            |                            |                            |                 |                         |                      |                        |                                     |  |               |          |  |                   |          |          |                           |  |            |            |   |  |          |          |   |  |                                |            |   |  |          |         |   |  |          |          |  |  |          |          |   |  |            |          |  |  |           |           |   |  |          |          |                  |  |          |          |  |  |          |          |                          |  |            |            |   |  |          |         |  |  |            |          |  |  |            |          |                                |  |          |          |                  |  |          |          |                 |  |          |          |                               |  |         |         |                                     |  |          |          |  |  |         |         |  |  |          |          |  |  |          |          |  |  |          |          |   |  |          |          |   |  |                     |  |   |            |                                |  |                              |  |
| 1204 86  | 2004 43                    | Reissue independent claims over original patent   |            |                            |                            |                 |                         |                      |                        |                                     |  |               |          |  |                   |          |          |                           |  |            |            |   |  |          |          |   |  |                                |            |   |  |          |         |   |  |          |          |  |  |          |          |   |  |            |          |  |  |           |           |   |  |          |          |                  |  |          |          |  |  |          |          |                          |  |            |            |   |  |          |         |  |  |            |          |  |  |            |          |                                |  |          |          |                  |  |          |          |                 |  |          |          |                               |  |         |         |                                     |  |          |          |  |  |         |         |  |  |          |          |  |  |          |          |  |  |          |          |   |  |          |          |   |  |                     |  |   |            |                                |  |                              |  |
| 1205 18  | 2205 9                     | Reissue claims in excess of 20 and over original patent   |            |                            |                            |                 |                         |                      |                        |                                     |  |               |          |  |                   |          |          |                           |  |            |            |   |  |          |          |   |  |                                |            |   |  |          |         |   |  |          |          |  |  |          |          |   |  |            |          |  |  |           |           |   |  |          |          |                  |  |          |          |  |  |          |          |                          |  |            |            |   |  |          |         |  |  |            |          |  |  |            |          |                                |  |          |          |                  |  |          |          |                 |  |          |          |                               |  |         |         |                                     |  |          |          |  |  |         |         |  |  |          |          |  |  |          |          |  |  |          |          |   |  |          |          |   |  |                     |  |   |            |                                |  |                              |  |
| SUBTOTAL (2) (\$ <b>0.00</b> )   |                            |   |            |                            |                            |                 |                         |                      |                        |                                     |  |               |          |  |                   |          |          |                           |  |            |            |   |  |          |          |   |  |                                |            |   |  |          |         |   |  |          |          |  |  |          |          |   |  |            |          |  |  |           |           |   |  |          |          |                  |  |          |          |  |  |          |          |                          |  |            |            |   |  |          |         |  |  |            |          |  |  |            |          |                                |  |          |          |                  |  |          |          |                 |  |          |          |                               |  |         |         |                                     |  |          |          |  |  |         |         |  |  |          |          |  |  |          |          |  |  |          |          |   |  |          |          |   |  |                     |  |   |            |                                |  |                              |  |
| <p><b>4. CLAIMS</b></p> <table border="1" style="width: 100%; border-collapse: collapse;"> <thead> <tr> <th>Large Entity Fee Code (\$)</th> <th>Small Entity Fee Code (\$)</th> <th>Fee Description</th> <th>Fee Paid</th> </tr> </thead> <tbody> <tr><td>1202 18</td><td>2202 9</td><td>Claims in excess of 20</td><td></td></tr> <tr><td>1201 86</td><td>2001 43</td><td>Independent claims in excess of 3</td><td></td></tr> <tr><td>1203 290</td><td>2003 145</td><td>Multiple dependent claim</td><td></td></tr> <tr><td>1204 86</td><td>2004 43</td><td>Reissue independent claims over original patent</td><td></td></tr> <tr><td>1205 18</td><td>2205 9</td><td>Reissue claims in excess of 20 and over original patent</td><td></td></tr> <tr> <td colspan="2">SUBTOTAL (2) (\$ <b>0.00</b>)</td> <td colspan="2"></td> </tr> </tbody> </table>       |                            |   |            | Large Entity Fee Code (\$) | Small Entity Fee Code (\$) | Fee Description | Fee Paid                | 1202 18              | 2202 9                 | Claims in excess of 20              |  | 1201 86       | 2001 43  | Independent claims in excess of 3                      |                   | 1203 290 | 2003 145 | Multiple dependent claim  |  | 1204 86    | 2004 43    | Reissue independent claims over original patent |  | 1205 18  | 2205 9   | Reissue claims in excess of 20 and over original patent |  | SUBTOTAL (2) (\$ <b>0.00</b> ) |            |   |  |          |         |   |  |          |          |  |  |          |          |   |  |            |          |  |  |           |           |   |  |          |          |                  |  |          |          |  |  |          |          |                          |  |            |            |   |  |          |         |  |  |            |          |  |  |            |          |                                |  |          |          |                  |  |          |          |                 |  |          |          |                               |  |         |         |                                     |  |          |          |  |  |         |         |  |  |          |          |  |  |          |          |  |  |          |          |   |  |          |          |   |  |                     |  |   |            |                                |  |                              |  |
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| SUBTOTAL (2) (\$ <b>0.00</b> )   |                            |   |            |                            |                            |                 |                         |                      |                        |                                     |  |               |          |  |                   |          |          |                           |  |            |            |   |  |          |          |   |  |                                |            |   |  |          |         |   |  |          |          |  |  |          |          |   |  |            |          |  |  |           |           |   |  |          |          |                  |  |          |          |  |  |          |          |                          |  |            |            |   |  |          |         |  |  |            |          |  |  |            |          |                                |  |          |          |                  |  |          |          |                 |  |          |          |                               |  |         |         |                                     |  |          |          |  |  |         |         |  |  |          |          |  |  |          |          |  |  |          |          |   |  |          |          |   |  |                     |  |   |            |                                |  |                              |  |
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| 1202 18  | 2202 9                     | Claims in excess of 20  |            |                            |                            |                 |                         |                      |                        |                                     |  |               |          |  |                   |          |          |                           |  |            |            |   |  |          |          |   |  |                                |            |   |  |          |         |   |  |          |          |  |  |          |          |   |  |            |          |  |  |           |           |   |  |          |          |                  |  |          |          |  |  |          |          |                          |  |            |            |   |  |          |         |  |  |            |          |  |  |            |          |                                |  |          |          |                  |  |          |          |                 |  |          |          |                               |  |         |         |                                     |  |          |          |  |  |         |         |  |  |          |          |  |  |          |          |  |  |          |          |   |  |          |          |   |  |                     |  |   |            |                                |  |                              |  |
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| SUBTOTAL (2) (\$ <b>0.00</b> )   |                            |   |            |                            |                            |                 |                         |                      |                        |                                     |  |               |          |  |                   |          |          |                           |  |            |            |   |  |          |          |   |  |                                |            |   |  |          |         |   |  |          |          |  |  |          |          |   |  |            |          |  |  |           |           |   |  |          |          |                  |  |          |          |  |  |          |          |                          |  |            |            |   |  |          |         |  |  |            |          |  |  |            |          |                                |  |          |          |                  |  |          |          |                 |  |          |          |                               |  |         |         |                                     |  |          |          |  |  |         |         |  |  |          |          |  |  |          |          |  |  |          |          |   |  |          |          |   |  |                     |  |   |            |                                |  |                              |  |
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| 1202 18  | 2202 9                     | Claims in excess of 20  |            |                            |                            |                 |                         |                      |                        |                                     |  |               |          |  |                   |          |          |                           |  |            |            |   |  |          |          |   |  |                                |            |   |  |          |         |   |  |          |          |  |  |          |          |   |  |            |          |  |  |           |           |   |  |          |          |                  |  |          |          |  |  |          |          |                          |  |            |            |   |  |          |         |  |  |            |          |  |  |            |          |                                |  |          |          |                  |  |          |          |                 |  |          |          |                               |  |         |         |                                     |  |          |          |  |  |         |         |  |  |          |          |  |  |          |          |  |  |          |          |   |  |          |          |   |  |                     |  |   |            |                                |  |                              |  |
| 1201 86  | 2001 43                    | Independent claims in excess of 3   |            |                            |                            |                 |                         |                      |                        |                                     |  |               |          |  |                   |          |          |                           |  |            |            |   |  |          |          |   |  |                                |            |   |  |          |         |   |  |          |          |  |  |          |          |   |  |            |          |  |  |           |           |   |  |          |          |                  |  |          |          |  |  |          |          |                          |  |            |            |   |  |          |         |  |  |            |          |  |  |            |          |                                |  |          |          |                  |  |          |          |                 |  |          |          |                               |  |         |         |                                     |  |          |          |  |  |         |         |  |  |          |          |  |  |          |          |  |  |          |          |   |  |          |          |   |  |                     |  |   |            |                                |  |                              |  |
| 1203 290   | 2003 145                   | Multiple dependent claim  |            |                            |                            |                 |                         |                      |                        |                                     |  |               |          |  |                   |          |          |                           |  |            |            |   |  |          |          |   |  |                                |            |   |  |          |         |   |  |          |          |  |  |          |          |   |  |            |          |  |  |           |           |   |  |          |          |                  |  |          |          |  |  |          |          |                          |  |            |            |   |  |          |         |  |  |            |          |  |  |            |          |                                |  |          |          |                  |  |          |          |                 |  |          |          |                               |  |         |         |                                     |  |          |          |  |  |         |         |  |  |          |          |  |  |          |          |  |  |          |          |   |  |          |          |   |  |                     |  |   |            |                                |  |                              |  |
| 1204 86  | 2004 43                    | Reissue independent claims over original patent   |            |                            |                            |                 |                         |                      |                        |                                     |  |               |          |  |                   |          |          |                           |  |            |            |   |  |          |          |   |  |                                |            |   |  |          |         |   |  |          |          |  |  |          |          |   |  |            |          |  |  |           |           |   |  |          |          |                  |  |          |          |  |  |          |          |                          |  |            |            |   |  |          |         |  |  |            |          |  |  |            |          |                                |  |          |          |                  |  |          |          |                 |  |          |          |                               |  |         |         |                                     |  |          |          |  |  |         |         |  |  |          |          |  |  |          |          |  |  |          |          |   |  |          |          |   |  |                     |  |   |            |                                |  |                              |  |
| 1205 18  | 2205 9                     | Reissue claims in excess of 20 and over original patent   |            |                            |                            |                 |                         |                      |                        |                                     |  |               |          |  |                   |          |          |                           |  |            |            |   |  |          |          |   |  |                                |            |   |  |          |         |   |  |          |          |  |  |          |          |   |  |            |          |  |  |           |           |   |  |          |          |                  |  |          |          |  |  |          |          |                          |  |            |            |   |  |          |         |  |  |            |          |  |  |            |          |                                |  |          |          |                  |  |          |          |                 |  |          |          |                               |  |         |         |                                     |  |          |          |  |  |         |         |  |  |          |          |  |  |          |          |  |  |          |          |   |  |          |          |   |  |                     |  |   |            |                                |  |                              |  |
| SUBTOTAL (2) (\$ <b>0.00</b> )   |                            |   |            |                            |                            |                 |                         |                      |                        |                                     |  |               |          |  |                   |          |          |                           |  |            |            |   |  |          |          |   |  |                                |            |   |  |          |         |   |  |          |          |  |  |          |          |   |  |            |          |  |  |           |           |   |  |          |          |                  |  |          |          |  |  |          |          |                          |  |            |            |   |  |          |         |  |  |            |          |  |  |            |          |                                |  |          |          |                  |  |          |          |                 |  |          |          |                               |  |         |         |                                     |  |          |          |  |  |         |         |  |  |          |          |  |  |          |          |  |  |          |          |   |  |          |          |   |  |                     |  |   |            |                                |  |                              |  |
| <p><b>7. CLAIMS</b></p> <table border="1" style="width: 100%; border-collapse: collapse;"> <thead> <tr> <th>Large Entity Fee Code (\$)</th> <th>Small Entity Fee Code (\$)</th> <th>Fee Description</th> <th>Fee Paid</th> </tr> </thead> <tbody> <tr><td>1202 18</td><td>2202 9</td><td>Claims in excess of 20</td><td></td></tr> <tr><td>1201 86</td><td>2001 43</td><td>Independent claims in excess of 3</td><td></td></tr> <tr><td>1203 290</td><td>2003 145</td><td>Multiple dependent claim</td><td></td></tr> <tr><td>1204 86</td><td>2004 43</td><td>Reissue independent claims over original patent</td><td></td></tr> <tr><td>1205 18</td><td>2205 9</td><td>Reissue claims in excess of 20 and over original patent</td><td></td></tr> <tr> <td colspan="2">SUBTOTAL (2) (\$ <b>0.00</b>)</td> <td colspan="2"></td> </tr> </tbody> </table>       |                            |   |            | Large Entity Fee Code (\$) | Small Entity Fee Code (\$) | Fee Description | Fee Paid                | 1202 18              | 2202 9                 | Claims in excess of 20              |  | 1201 86       | 2001 43  | Independent claims in excess of 3                      |                   | 1203 290 | 2003 145 | Multiple dependent claim  |  | 1204 86    | 2004 43    | Reissue independent claims over original patent |  | 1205 18  | 2205 9   | Reissue claims in excess of 20 and over original patent |  | SUBTOTAL (2) (\$ <b>0.00</b> ) |            |   |  |          |         |   |  |          |          |  |  |          |          |   |  |            |          |  |  |           |           |   |  |          |          |                  |  |          |          |  |  |          |          |                          |  |            |            |   |  |          |         |  |  |            |          |  |  |            |          |                                |  |          |          |                  |  |          |          |                 |  |          |          |                               |  |         |         |                                     |  |          |          |  |  |         |         |  |  |          |          |  |  |          |          |  |  |          |          |   |  |          |          |   |  |                     |  |   |            |                                |  |                              |  |
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| 1203 290   | 2003 145                   | Multiple dependent claim  |            |                            |                            |                 |                         |                      |                        |                                     |  |               |          |  |                   |          |          |                           |  |            |            |   |  |          |          |   |  |                                |            |   |  |          |         |   |  |          |          |  |  |          |          |   |  |            |          |  |  |           |           |   |  |          |          |                  |  |          |          |  |  |          |          |                          |  |            |            |   |  |          |         |  |  |            |          |  |  |            |          |                                |  |          |          |                  |  |          |          |                 |  |          |          |                               |  |         |         |                                     |  |          |          |  |  |         |         |  |  |          |          |  |  |          |          |  |  |          |          |   |  |          |          |   |  |                     |  |   |            |                                |  |                              |  |
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| SUBTOTAL (2) (\$ <b>0.00</b> )   |                            |   |            |                            |                            |                 |                         |                      |                        |                                     |  |               |          |  |                   |          |          |                           |  |            |            |   |  |          |          |   |  |                                |            |   |  |          |         |   |  |          |          |  |  |          |          |   |  |            |          |  |  |           |           |   |  |          |          |                  |  |          |          |  |  |          |          |                          |  |            |            |   |  |          |         |  |  |            |          |  |  |            |          |                                |  |          |          |                  |  |          |          |                 |  |          |          |                               |  |         |         |                                     |  |          |          |  |  |         |         |  |  |          |          |  |  |          |          |  |  |          |          |   |  |          |          |   |  |                     |  |   |            |                                |  |                              |  |
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| 1202 18  | 2202 9                     | Claims in excess of 20  |            |                            |                            |                 |                         |                      |                        |                                     |  |               |          |  |                   |          |          |                           |  |            |            |   |  |          |          |   |  |                                |            |   |  |          |         |   |  |          |          |  |  |          |          |   |  |            |          |  |  |           |           |   |  |          |          |                  |  |          |          |  |  |          |          |                          |  |            |            |   |  |          |         |  |  |            |          |  |  |            |          |                                |  |          |          |                  |  |          |          |                 |  |          |          |                               |  |         |         |                                     |  |          |          |  |  |         |         |  |  |          |          |  |  |          |          |  |  |          |          |   |  |          |          |   |  |                     |  |   |            |                                |  |                              |  |
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| 1203 290   | 2003 145                   | Multiple dependent claim  |            |                            |                            |                 |                         |                      |                        |                                     |  |               |          |  |                   |          |          |                           |  |            |            |   |  |          |          |   |  |                                |            |   |  |          |         |   |  |          |          |  |  |          |          |   |  |            |          |  |  |           |           |   |  |          |          |                  |  |          |          |  |  |          |          |                          |  |            |            |   |  |          |         |  |  |            |          |  |  |            |          |                                |  |          |          |                  |  |          |          |                 |  |          |          |                               |  |         |         |                                     |  |          |          |  |  |         |         |  |  |          |          |  |  |          |          |  |  |          |          |   |  |          |          |   |  |                     |  |   |            |                                |  |                              |  |
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| SUBTOTAL (2) (\$ <b>0.00</b> )   |                            |   |            |                            |                            |                 |                         |                      |                        |                                     |  |               |          |  |                   |          |          |                           |  |            |            |   |  |          |          |   |  |                                |            |   |  |          |         |   |  |          |          |  |  |          |          |   |  |            |          |  |  |           |           |   |  |          |          |                  |  |          |          |  |  |          |          |                          |  |            |            |   |  |          |         |  |  |            |          |  |  |            |          |                                |  |          |          |                  |  |          |          |                 |  |          |          |                               |  |         |         |                                     |  |          |          |  |  |         |         |  |  |          |          |  |  |          |          |  |  |          |          |   |  |          |          |   |  |                     |  |   |            |                                |  |                              |  |
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| Large Entity Fee Code (\$)   | Small Entity Fee Code (\$) | Fee Description   | Fee Paid   |                            |                            |                 |                         |                      |                        |                                     |  |               |          |  |                   |          |          |                           |  |            |            |   |  |          |          |   |  |                                |            |   |  |          |         |   |  |          |          |  |  |          |          |   |  |            |          |  |  |           |           |   |  |          |          |                  |  |          |          |  |  |          |          |                          |  |            |            |   |  |          |         |  |  |            |          |  |  |            |          |                                |  |          |          |                  |  |          |          |                 |  |          |          |                               |  |         |         |                                     |  |          |          |  |  |         |         |  |  |          |          |  |  |          |          |  |  |          |          |   |  |          |          |   |  |                     |  |   |            |                                |  |                              |  |
| 1202 18  | 2202 9                     | Claims in excess of 20  |            |                            |                            |                 |                         |                      |                        |                                     |  |               |          |  |                   |          |          |                           |  |            |            |   |  |          |          |   |  |                                |            |   |  |          |         |   |  |          |          |  |  |          |          |   |  |            |          |  |  |           |           |   |  |          |          |                  |  |          |          |  |  |          |          |                          |  |            |            |   |  |          |         |  |  |            |          |  |  |            |          |                                |  |          |          |                  |  |          |          |                 |  |          |          |                               |  |         |         |                                     |  |          |          |  |  |         |         |  |  |          |          |  |  |          |          |  |  |          |          |   |  |          |          |   |  |                     |  |   |            |                                |  |                              |  |
| 1201 86  | 2001 43                    | Independent claims in excess of 3   |            |                            |                            |                 |                         |                      |                        |                                     |  |               |          |  |                   |          |          |                           |  |            |            |   |  |          |          |   |  |                                |            |   |  |          |         |   |  |          |          |  |  |          |          |   |  |            |          |  |  |           |           |   |  |          |          |                  |  |          |          |  |  |          |          |                          |  |            |            |   |  |          |         |  |  |            |          |  |  |            |          |                                |  |          |          |                  |  |          |          |                 |  |          |          |                               |  |         |         |                                     |  |          |          |  |  |         |         |  |  |          |          |  |  |          |          |  |  |          |          |   |  |          |          |   |  |                     |  |   |            |                                |  |                              |  |
| 1203 290   | 2003 145                   | Multiple dependent claim  |            |                            |                            |                 |                         |                      |                        |                                     |  |               |          |  |                   |          |          |                           |  |            |            |   |  |          |          |   |  |                                |            |   |  |          |         |   |  |          |          |  |  |          |          |   |  |            |          |  |  |           |           |   |  |          |          |                  |  |          |          |  |  |          |          |                          |  |            |            |   |  |          |         |  |  |            |          |  |  |            |          |                                |  |          |          |                  |  |          |          |                 |  |          |          |                               |  |         |         |                                     |  |          |          |  |  |         |         |  |  |          |          |  |  |          |          |  |  |          |          |   |  |          |          |   |  |                     |  |   |            |                                |  |                              |  |
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| 1205 18  | 2205 9                     | Reissue claims in excess of 20 and over original patent   |            |                            |                            |                 |                         |                      |                        |                                     |  |               |          |  |                   |          |          |                           |  |            |            |   |  |          |          |   |  |                                |            |   |  |          |         |   |  |          |          |  |  |          |          |   |  |            |          |  |  |           |           |   |  |          |          |                  |  |          |          |  |  |          |          |                          |  |            |            |   |  |          |         |  |  |            |          |  |  |            |          |                                |  |          |          |                  |  |          |          |                 |  |          |          |                               |  |         |         |                                     |  |          |          |  |  |         |         |  |  |          |          |  |  |          |          |  |  |          |          |   |  |          |          |   |  |                     |  |   |            |                                |  |                              |  |
| SUBTOTAL (2) (\$ <b>0.00</b> )   |                            |   |            |                            |                            |                 |                         |                      |                        |                                     |  |               |          |  |                   |          |          |                           |  |            |            |   |  |          |          |   |  |                                |            |   |  |          |         |   |  |          |          |  |  |          |          |   |  |            |          |  |  |           |           |   |  |          |          |                  |  |          |          |  |  |          |          |                          |  |            |            |   |  |          |         |  |  |            |          |  |  |            |          |                                |  |          |          |                  |  |          |          |                 |  |          |          |                               |  |         |         |                                     |  |          |          |  |  |         |         |  |  |          |          |  |  |          |          |  |  |          |          |   |  |          |          |   |  |                     |  |   |            |                                |  |                              |  |
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| 1205 18  | 2205 9                     | Reissue claims in excess of 20 and over original patent   |            |                            |                            |                 |                         |                      |                        |                                     |  |               |          |  |                   |          |          |                           |  |            |            |   |  |          |          |   |  |                                |            |   |  |          |         |   |  |          |          |  |  |          |          |   |  |            |          |  |  |           |           |   |  |          |          |                  |  |          |          |  |  |          |          |                          |  |            |            |   |  |          |         |  |  |            |          |  |  |            |          |                                |  |          |          |                  |  |          |          |                 |  |          |          |                               |  |         |         |                                     |  |          |          |  |  |         |         |  |  |          |          |  |  |          |          |  |  |          |          |   |  |          |          |   |  |                     |  |   |            |                                |  |                              |  |
| SUBTOTAL (2) (\$ <b>0.00</b> )   |                            |   |            |                            |                            |                 |                         |                      |                        |                                     |  |               |          |  |                   |          |          |                           |  |            |            |   |  |          |          |   |  |                                |            |   |  |          |         |   |  |          |          |  |  |          |          |   |  |            |          |  |  |           |           |   |  |          |          |                  |  |          |          |  |  |          |          |                          |  |            |            |   |  |          |         |  |  |            |          |  |  |            |          |                                |  |          |          |                  |  |          |          |                 |  |          |          |                               |  |         |         |                                     |  |          |          |  |  |         |         |  |  |          |          |  |  |          |          |  |  |          |          |   |  |          |          |   |  |                     |  |   |            |                                |  |                              |  |
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| 1202 18  | 2202 9                     | Claims in excess of 20  |            |                            |                            |                 |                         |                      |                        |                                     |  |               |          |  |                   |          |          |                           |  |            |            |   |  |          |          |   |  |                                |            |   |  |          |         |   |  |          |          |  |  |          |          |   |  |            |          |  |  |           |           |   |  |          |          |                  |  |          |          |  |  |          |          |                          |  |            |            |   |  |          |         |  |  |            |          |  |  |            |          |                                |  |          |          |                  |  |          |          |                 |  |          |          |                               |  |         |         |                                     |  |          |          |  |  |         |         |  |  |          |          |  |  |          |          |  |  |          |          |   |  |          |          |   |  |                     |  |   |            |                                |  |                              |  |
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| 1203 290   | 2003 145                   | Multiple dependent claim  |            |                            |                            |                 |                         |                      |                        |                                     |  |               |          |  |                   |          |          |                           |  |            |            |   |  |          |          |   |  |                                |            |   |  |          |         |   |  |          |          |  |  |          |          |   |  |            |          |  |  |           |           |   |  |          |          |                  |  |          |          |  |  |          |          |                          |  |            |            |   |  |          |         |  |  |            |          |  |  |            |          |                                |  |          |          |                  |  |          |          |                 |  |          |          |                               |  |         |         |                                     |  |          |          |  |  |         |         |  |  |          |          |  |  |          |          |  |  |          |          |   |  |          |          |   |  |                     |  |   |            |                                |  |                              |  |
| 1204 86  | 2004 43                    | Reissue independent claims over original patent   |            |                            |                            |                 |                         |                      |                        |                                     |  |               |          |  |                   |          |          |                           |  |            |            |   |  |          |          |   |  |                                |            |   |  |          |         |   |  |          |          |  |  |          |          |   |  |            |          |  |  |           |           |   |  |          |          |                  |  |          |          |  |  |          |          |                          |  |            |            |   |  |          |         |  |  |            |          |  |  |            |          |                                |  |          |          |                  |  |          |          |                 |  |          |          |                               |  |         |         |                                     |  |          |          |  |  |         |         |  |  |          |          |  |  |          |          |  |  |          |          |   |  |          |          |   |  |                     |  |   |            |                                |  |                              |  |
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| SUBTOTAL (2) (\$ <b>0.00</b> )   |                            |   |            |                            |                            |                 |                         |                      |                        |                                     |  |               |          |  |                   |          |          |                           |  |            |            |   |  |          |          |   |  |                                |            |   |  |          |         |   |  |          |          |  |  |          |          |   |  |            |          |  |  |           |           |   |  |          |          |                  |  |          |          |  |  |          |          |                          |  |            |            |   |  |          |         |  |  |            |          |  |  |            |          |                                |  |          |          |                  |  |          |          |                 |  |          |          |                               |  |         |         |                                     |  |          |          |  |  |         |         |  |  |          |          |  |  |          |          |  |  |          |          |   |  |          |          |   |  |                     |  |   |            |                                |  |                              |  |
| <p><b>12. CLAIMS</b></p> <table border="1" style="width: 100%; border-collapse: collapse;"> <thead> <tr> <th>Large Entity Fee Code (\$)</th> <th>Small Entity Fee Code (\$)</th> <th>Fee Description</th> <th>Fee Paid</th> </tr> </thead> <tbody> <tr><td>1202 18</td><td>2202 9</td><td>Claims in excess of 20</td><td></td></tr> <tr><td>1201 86</td><td>2001 43</td><td>Independent claims in excess of 3</td><td></td></tr> <tr><td>1203 290</td><td>2003 145</td><td>Multiple dependent claim</td><td></td></tr> <tr><td>1204 86</td><td>2004 43</td><td>Reissue independent claims over original patent</td><td></td></tr> <tr><td>1205 18</td><td>2205 9</td><td>Reissue claims in excess of 20 and over original patent</td><td></td></tr> <tr> <td colspan="2">SUBTOTAL (2) (\$ <b>0.00</b>)</td> <td colspan="2"></td> </tr> </tbody> </table>      |                            |   |            | Large Entity Fee Code (\$) | Small Entity Fee Code (\$) | Fee Description | Fee Paid                | 1202 18              | 2202 9                 | Claims in excess of 20              |  | 1201 86       | 2001 43  | Independent claims in excess of 3                      |                   | 1203 290 | 2003 145 | Multiple dependent claim  |  | 1204 86    | 2004 43    | Reissue independent claims over original patent |  | 1205 18  | 2205 9   | Reissue claims in excess of 20 and over original patent |  | SUBTOTAL (2) (\$ <b>0.00</b> ) |            |   |  |          |         |   |  |          |          |  |  |          |          |   |  |            |          |  |  |           |           |   |  |          |          |                  |  |          |          |  |  |          |          |                          |  |            |            |   |  |          |         |  |  |            |          |  |  |            |          |                                |  |          |          |                  |  |          |          |                 |  |          |          |                               |  |         |         |                                     |  |          |          |  |  |         |         |  |  |          |          |  |  |          |          |  |  |          |          |   |  |          |          |   |  |                     |  |   |            |                                |  |                              |  |
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| 1203 290   | 2003 145                   | Multiple dependent claim  |            |                            |                            |                 |                         |                      |                        |                                     |  |               |          |  |                   |          |          |                           |  |            |            |   |  |          |          |   |  |                                |            |   |  |          |         |   |  |          |          |  |  |          |          |   |  |            |          |  |  |           |           |   |  |          |          |                  |  |          |          |  |  |          |          |                          |  |            |            |   |  |          |         |  |  |            |          |  |  |            |          |                                |  |          |          |                  |  |          |          |                 |  |          |          |                               |  |         |         |                                     |  |          |          |  |  |         |         |  |  |          |          |  |  |          |          |  |  |          |          |   |  |          |          |   |  |                     |  |   |            |                                |  |                              |  |
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| SUBTOTAL (2) (\$ <b>0.00</b> )   |                            |   |            |                            |                            |                 |                         |                      |                        |                                     |  |               |          |  |                   |          |          |                           |  |            |            |   |  |          |          |   |  |                                |            |   |  |          |         |   |  |          |          |  |  |          |          |   |  |            |          |  |  |           |           |   |  |          |          |                  |  |          |          |  |  |          |          |                          |  |            |            |   |  |          |         |  |  |            |          |  |  |            |          |                                |  |          |          |                  |  |          |          |                 |  |          |          |                               |  |         |         |                                     |  |          |          |  |  |         |         |  |  |          |          |  |  |          |          |  |  |          |          |   |  |          |          |   |  |                     |  |   |            |                                |  |                              |  |
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| 1203 290   | 2003 145                   | Multiple dependent claim  |            |                            |                            |                 |                         |                      |                        |                                     |  |               |          |  |                   |          |          |                           |  |            |            |   |  |          |          |   |  |                                |            |   |  |          |         |   |  |          |          |  |  |          |          |   |  |            |          |  |  |           |           |   |  |          |          |                  |  |          |          |  |  |          |          |                          |  |            |            |   |  |          |         |  |  |            |          |  |  |            |          |                                |  |          |          |                  |  |          |          |                 |  |          |          |                               |  |         |         |                                     |  |          |          |  |  |         |         |  |  |          |          |  |  |          |          |  |  |          |          |   |  |          |          |   |  |                     |  |   |            |                                |  |                              |  |
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| SUBTOTAL (2) (\$ <b>0.00</b> )   |                            |   |            |                            |                            |                 |                         |                      |                        |                                     |  |               |          |  |                   |          |          |                           |  |            |            |   |  |          |          |   |  |                                |            |   |  |          |         |   |  |          |          |  |  |          |          |   |  |            |          |  |  |           |           |   |  |          |          |                  |  |          |          |  |  |          |          |                          |  |            |            |   |  |          |         |  |  |            |          |  |  |            |          |                                |  |          |          |                  |  |          |          |                 |  |          |          |                               |  |         |         |                                     |  |          |          |  |  |         |         |  |  |          |          |  |  |          |          |  |  |          |          |   |  |          |          |   |  |                     |  |   |            |                                |  |                              |  |
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| 1203 290   | 2003 145                   | Multiple dependent claim  |            |                            |                            |                 |                         |                      |                        |                                     |  |               |          |  |                   |          |          |                           |  |            |            |   |  |          |          |   |  |                                |            |   |  |          |         |   |  |          |          |  |  |          |          |   |  |            |          |  |  |           |           |   |  |          |          |                  |  |          |          |  |  |          |          |                          |  |            |            |   |  |          |         |  |  |            |          |  |  |            |          |                                |  |          |          |                  |  |          |          |                 |  |          |          |                               |  |         |         |                                     |  |          |          |  |  |         |         |  |  |          |          |  |  |          |          |  |  |          |          |   |  |          |          |   |  |                     |  |   |            |                                |  |                              |  |
| 1204 86  | 2004 43                    | Reissue independent claims over original patent   |            |                            |                            |                 |                         |                      |                        |                                     |  |               |          |  |                   |          |          |                           |  |            |            |   |  |          |          |   |  |                                |            |   |  |          |         |   |  |          |          |  |  |          |          |   |  |            |          |  |  |           |           |   |  |          |          |                  |  |          |          |  |  |          |          |                          |  |            |            |   |  |          |         |  |  |            |          |  |  |            |          |                                |  |          |          |                  |  |          |          |                 |  |          |          |                               |  |         |         |                                     |  |          |          |  |  |         |         |  |  |          |          |  |  |          |          |  |  |          |          |   |  |          |          |   |  |                     |  |   |            |                                |  |                              |  |
| 1205 18  | 2205 9                     | Reissue claims in excess of 20 and over original patent   |            |                            |                            |                 |                         |                      |                        |                                     |  |               |          |  |                   |          |          |                           |  |            |            |   |  |          |          |   |  |                                |            |   |  |          |         |   |  |          |          |  |  |          |          |   |  |            |          |  |  |           |           |   |  |          |          |                  |  |          |          |  |  |          |          |                          |  |            |            |   |  |          |         |  |  |            |          |  |  |            |          |                                |  |          |          |                  |  |          |          |                 |  |          |          |                               |  |         |         |                                     |  |          |          |  |  |         |         |  |  |          |          |  |  |          |          |  |  |          |          |   |  |          |          |   |  |                     |  |   |            |                                |  |                              |  |
| SUBTOTAL (2) (\$ <b>0.00</b> )   |                            |   |            |                            |                            |                 |                         |                      |                        |                                     |  |               |          |  |                   |          |          |                           |  |            |            |   |  |          |          |   |  |                                |            |   |  |          |         |   |  |          |          |  |  |          |          |   |  |            |          |  |  |           |           |   |  |          |          |                  |  |          |          |  |  |          |          |                          |  |            |            |   |  |          |         |  |  |            |          |  |  |            |          |                                |  |          |          |                  |  |          |          |                 |  |          |          |                               |  |         |         |                                     |  |          |          |  |  |         |         |  |  |          |          |  |  |          |          |  |  |          |          |   |  |          |          |   |  |                     |  |   |            |                                |  |                              |  |
| <p><b>15. CLAIMS</b></p> <table border="1" style="width: 100%; border-collapse: collapse;"> <thead> <tr> <th>Large Entity Fee Code (\$)</th> <th>Small Entity Fee Code (\$)</th> <th>Fee Description</th> <th>Fee Paid</th> </tr> </thead> <tbody> <tr><td>1202 18</td><td>2202 9</td><td>Claims in excess of 20</td><td></td></tr> <tr><td>1201 86</td><td>2001 43</td><td>Independent claims in excess of 3</td><td></td></tr> <tr><td>1203 290</td><td>2003 145</td><td>Multiple dependent claim</td><td></td></tr> <tr><td>1204 86</td><td>2004 43</td><td>Reissue independent claims over original patent</td><td></td></tr> <tr><td>1205 18</td><td>2205 9</td><td>Reissue claims in excess of 20 and over original patent</td><td></td></tr> <tr> <td colspan="2">SUBTOTAL (2) (\$ <b>0.00</b>)</td> <td colspan="2"></td> </tr> </tbody> </table>      |                            |   |            | Large Entity Fee Code (\$) | Small Entity Fee Code (\$) | Fee Description | Fee Paid                | 1202 18              | 2202 9                 | Claims in excess of 20              |  | 1201 86       | 2001 43  | Independent claims in excess of 3                      |                   | 1203 290 | 2003 145 | Multiple dependent claim  |  | 1204 86    | 2004 43    | Reissue independent claims over original patent |  | 1205 18  | 2205 9   | Reissue claims in excess of 20 and over original patent |  | SUBTOTAL (2) (\$ <b>0.00</b> ) |            |   |  |          |         |   |  |          |          |  |  |          |          |   |  |            |          |  |  |           |           |   |  |          |          |                  |  |          |          |  |  |          |          |                          |  |            |            |   |  |          |         |  |  |            |          |  |  |            |          |                                |  |          |          |                  |  |          |          |                 |  |          |          |                               |  |         |         |                                     |  |          |          |  |  |         |         |  |  |          |          |  |  |          |          |  |  |          |          |   |  |          |          |   |  |                     |  |   |            |                                |  |                              |  |
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| 1203 290   | 2003 145                   | Multiple dependent claim  |            |                            |                            |                 |                         |                      |                        |                                     |  |               |          |  |                   |          |          |                           |  |            |            |   |  |          |          |   |  |                                |            |   |  |          |         |   |  |          |          |  |  |          |          |   |  |            |          |  |  |           |           |   |  |          |          |                  |  |          |          |  |  |          |          |                          |  |            |            |   |  |          |         |  |  |            |          |  |  |            |          |                                |  |          |          |                  |  |          |          |                 |  |          |          |                               |  |         |         |                                     |  |          |          |  |  |         |         |  |  |          |          |  |  |          |          |  |  |          |          |   |  |          |          |   |  |                     |  |   |            |                                |  |                              |  |
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| SUBTOTAL (2) (\$ <b>0.00</b> )   |                            |   |            |                            |                            |                 |                         |                      |                        |                                     |  |               |          |  |                   |          |          |                           |  |            |            |   |  |          |          |   |  |                                |            |   |  |          |         |   |  |          |          |  |  |          |          |   |  |            |          |  |  |           |           |   |  |          |          |                  |  |          |          |  |  |          |          |                          |  |            |            |   |  |          |         |  |  |            |          |  |  |            |          |                                |  |          |          |                  |  |          |          |                 |  |          |          |                               |  |         |         |                                     |  |          |          |  |  |         |         |  |  |          |          |  |  |          |          |  |  |          |          |   |  |          |          |   |  |                     |  |   |            |                                |  |                              |  |
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| 1202 18  | 2202 9                     | Claims in excess of 20  |            |                            |                            |                 |                         |                      |                        |                                     |  |               |          |  |                   |          |          |                           |  |            |            |   |  |          |          |   |  |                                |            |   |  |          |         |   |  |          |          |  |  |          |          |   |  |            |          |  |  |           |           |   |  |          |          |                  |  |          |          |  |  |          |          |                          |  |            |            |   |  |          |         |  |  |            |          |  |  |            |          |                                |  |          |          |                  |  |          |          |                 |  |          |          |                               |  |         |         |                                     |  |          |          |  |  |         |         |  |  |          |          |  |  |          |          |  |  |          |          |   |  |          |          |   |  |                     |  |   |            |                                |  |                              |  |
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| 1203 290   | 2003 145                   | Multiple dependent claim  |            |                            |                            |                 |                         |                      |                        |                                     |  |               |          |  |                   |          |          |                           |  |            |            |   |  |          |          |   |  |                                |            |   |  |          |         |   |  |          |          |  |  |          |          |   |  |            |          |  |  |           |           |   |  |          |          |                  |  |          |          |  |  |          |          |                          |  |            |            |   |  |          |         |  |  |            |          |  |  |            |          |                                |  |          |          |                  |  |          |          |                 |  |          |          |                               |  |         |         |                                     |  |          |          |  |  |         |         |  |  |          |          |  |  |          |          |  |  |          |          |   |  |          |          |   |  |                     |  |   |            |                                |  |                              |  |
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| SUBTOTAL (2) (\$ <b>0.00</b> )   |                            |   |            |                            |                            |                 |                         |                      |                        |                                     |  |               |          |  |                   |          |          |                           |  |            |            |   |  |          |          |   |  |                                |            |   |  |          |         |   |  |          |          |  |  |          |          |   |  |            |          |  |  |           |           |   |  |          |          |                  |  |          |          |  |  |          |          |                          |  |            |            |   |  |          |         |  |  |            |          |  |  |            |          |                                |  |          |          |                  |  |          |          |                 |  |          |          |                               |  |         |         |                                     |  |          |          |  |  |         |         |  |  |          |          |  |  |          |          |  |  |          |          |   |  |          |          |   |  |                     |  |   |            |                                |  |                              |  |
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| 1202 18  | 2202 9                     | Claims in excess of 20  |            |                            |                            |                 |                         |                      |                        |                                     |  |               |          |  |                   |          |          |                           |  |            |            |   |  |          |          |   |  |                                |            |   |  |          |         |   |  |          |          |  |  |          |          |   |  |            |          |  |  |           |           |   |  |          |          |                  |  |          |          |  |  |          |          |                          |  |            |            |   |  |          |         |  |  |            |          |  |  |            |          |                                |  |          |          |                  |  |          |          |                 |  |          |          |                               |  |         |         |                                     |  |          |          |  |  |         |         |  |  |          |          |  |  |          |          |  |  |          |          |   |  |          |          |   |  |                     |  |   |            |                                |  |                              |  |
| 1201 86  | 2001 43                    | Independent claims in excess of 3   |            |                            |                            |                 |                         |                      |                        |                                     |  |               |          |  |                   |          |          |                           |  |            |            |   |  |          |          |   |  |                                |            |   |  |          |         |   |  |          |          |  |  |          |          |   |  |            |          |  |  |           |           |   |  |          |          |                  |  |          |          |  |  |          |          |                          |  |            |            |   |  |          |         |  |  |            |          |  |  |            |          |                                |  |          |          |                  |  |          |          |                 |  |          |          |                               |  |         |         |                                     |  |          |          |  |  |         |         |  |  |          |          |  |  |          |          |  |  |          |          |   |  |          |          |   |  |                     |  |   |            |                                |  |                              |  |
| 1203 290   | 2003 145                   | Multiple dependent claim  |            |                            |                            |                 |                         |                      |                        |                                     |  |               |          |  |                   |          |          |                           |  |            |            |   |  |          |          |   |  |                                |            |   |  |          |         |   |  |          |          |  |  |          |          |   |  |            |          |  |  |           |           |   |  |          |          |                  |  |          |          |  |  |          |          |                          |  |            |            |   |  |          |         |  |  |            |          |  |  |            |          |                                |  |          |          |                  |  |          |          |                 |  |          |          |                               |  |         |         |                                     |  |          |          |  |  |         |         |  |  |          |          |  |  |          |          |  |  |          |          |   |  |          |          |   |  |                     |  |   |            |                                |  |                              |  |
| 1204 86  | 2004 43                    | Reissue independent claims over original patent   |            |                            |                            |                 |                         |                      |                        |                                     |  |               |          |  |                   |          |          |                           |  |            |            |   |  |          |          |   |  |                                |            |   |  |          |         |   |  |          |          |  |  |          |          |   |  |            |          |  |  |           |           |   |  |          |          |                  |  |          |          |  |  |          |          |                          |  |            |            |   |  |          |         |  |  |            |          |  |  |            |          |                                |  |          |          |                  |  |          |          |                 |  |          |          |                               |  |         |         |                                     |  |          |          |  |  |         |         |  |  |          |          |  |  |          |          |  |  |          |          |   |  |          |          |   |  |                     |  |   |            |                                |  |                              |  |
| 1205 18  | 2205 9                     | Reissue claims in excess of 20 and over original patent   |            |                            |                            |                 |                         |                      |                        |                                     |  |               |          |  |                   |          |          |                           |  |            |            |   |  |          |          |   |  |                                |            |   |  |          |         |   |  |          |          |  |  |          |          |   |  |            |          |  |  |           |           |   |  |          |          |                  |  |          |          |  |  |          |          |                          |  |            |            |   |  |          |         |  |  |            |          |  |  |            |          |                                |  |          |          |                  |  |          |          |                 |  |          |          |                               |  |         |         |                                     |  |          |          |  |  |         |         |  |  |          |          |  |  |          |          |  |  |          |          |   |  |          |          |   |  |                     |  |   |            |                                |  |                              |  |
| SUBTOTAL (2) (\$ <b>0.00</b> )   |                            |   |            |                            |                            |                 |                         |                      |                        |                                     |  |               |          |  |                   |          |          |                           |  |            |            |   |  |          |          |   |  |                                |            |   |  |          |         |   |  |          |          |  |  |          |          |   |  |            |          |  |  |           |           |   |  |          |          |                  |  |          |          |  |  |          |          |                          |  |            |            |   |  |          |         |  |  |            |          |  |  |            |          |                                |  |          |          |                  |  |          |          |                 |  |          |          |                               |  |         |         |                                     |  |          |          |  |  |         |         |  |  |          |          |  |  |          |          |  |  |          |          |   |  |          |          |   |  |                     |  |   |            |                                |  |                              |  |
| <p><b>18. CLAIMS</b></p> <table border="1" style="width: 100%; border-collapse: collapse;"> <thead> <tr> <th>Large Entity Fee Code (\$)</th> <th>Small Entity Fee Code (\$)</th> <th>Fee Description</th> <th>Fee Paid</th> </tr> </thead> <tbody> <tr><td>1202 18</td><td>2202 9</td><td>Claims in excess of 20</td><td></td></tr> <tr><td>1201 86</td><td>2001 43</td><td>Independent claims in excess of 3</td><td></td></tr> <tr><td>1203 290</td><td>2003 145</td><td>Multiple dependent claim</td><td></td></tr> <tr><td>1204 86</td><td>2004 43</td><td>Reissue independent claims over original patent</td><td></td></tr> <tr><td>1205 18</td><td>2205 9</td><td>Reissue claims in excess of 20 and over original patent</td><td></td></tr> <tr> <td colspan="2">SUBTOTAL (2) (\$ <b>0.00</b>)</td> <td colspan="2"></td> </tr> </tbody> </table>      |                            |   |            | Large Entity Fee Code (\$) | Small Entity Fee Code (\$) | Fee Description | Fee Paid                | 1202 18              | 2202 9                 | Claims in excess of 20              |  | 1201 86       | 2001 43  | Independent claims in excess of 3                      |                   | 1203 290 | 2003 145 | Multiple dependent claim  |  | 1204 86    | 2004 43    | Reissue independent claims over original patent |  | 1205 18  | 2205 9   | Reissue claims in excess of 20 and over original patent |  | SUBTOTAL (2) (\$ <b>0.00</b> ) |            |   |  |          |         |   |  |          |          |  |  |          |          |   |  |            |          |  |  |           |           |   |  |          |          |                  |  |          |          |  |  |          |          |                          |  |            |            |   |  |          |         |  |  |            |          |  |  |            |          |                                |  |          |          |                  |  |          |          |                 |  |          |          |                               |  |         |         |                                     |  |          |          |  |  |         |         |  |  |          |          |  |  |          |          |  |  |          |          |   |  |          |          |   |  |                     |  |   |            |                                |  |                              |  |
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| 1203 290   | 2003 145                   | Multiple dependent claim  |            |                            |                            |                 |                         |                      |                        |                                     |  |               |          |  |                   |          |          |                           |  |            |            |   |  |          |          |   |  |                                |            |   |  |          |         |   |  |          |          |  |  |          |          |   |  |            |          |  |  |           |           |   |  |          |          |                  |  |          |          |  |  |          |          |                          |  |            |            |   |  |          |         |  |  |            |          |  |  |            |          |                                |  |          |          |                  |  |          |          |                 |  |          |          |                               |  |         |         |                                     |  |          |          |  |  |         |         |  |  |          |          |  |  |          |          |  |  |          |          |   |  |          |          |   |  |                     |  |   |            |                                |  |                              |  |
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| SUBTOTAL (2) (\$ <b>0.00</b> )   |                            |   |            |                            |                            |                 |                         |                      |                        |                                     |  |               |          |  |                   |          |          |                           |  |            |            |   |  |          |          |   |  |                                |            |   |  |          |         |   |  |          |          |  |  |          |          |   |  |            |          |  |  |           |           |   |  |          |          |                  |  |          |          |  |  |          |          |                          |  |            |            |   |  |          |         |  |  |            |          |  |  |            |          |                                |  |          |          |                  |  |          |          |                 |  |          |          |                               |  |         |         |                                     |  |          |          |  |  |         |         |  |  |          |          |  |  |          |          |  |  |          |          |   |  |          |          |   |  |                     |  |   |            |                                |  |                              |  |
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| 1202 18  | 2202 9                     | Claims in excess of 20  |            |                            |                            |                 |                         |                      |                        |                                     |  |               |          |  |                   |          |          |                           |  |            |            |   |  |          |          |   |  |                                |            |   |  |          |         |   |  |          |          |  |  |          |          |   |  |            |          |  |  |           |           |   |  |          |          |                  |  |          |          |  |  |          |          |                          |  |            |            |   |  |          |         |  |  |            |          |  |  |            |          |                                |  |          |          |                  |  |          |          |                 |  |          |          |                               |  |         |         |                                     |  |          |          |  |  |         |         |  |  |          |          |  |  |          |          |  |  |          |          |   |  |          |          |   |  |                     |  |   |            |                                |  |                              |  |
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| 1203 290   | 2003 145                   | Multiple dependent claim  |            |                            |                            |                 |                         |                      |                        |                                     |  |               |          |  |                   |          |          |                           |  |            |            |   |  |          |          |   |  |                                |            |   |  |          |         |   |  |          |          |  |  |          |          |   |  |            |          |  |  |           |           |   |  |          |          |                  |  |          |          |  |  |          |          |                          |  |            |            |   |  |          |         |  |  |            |          |  |  |            |          |                                |  |          |          |                  |  |          |          |                 |  |          |          |                               |  |         |         |                                     |  |          |          |  |  |         |         |  |  |          |          |  |  |          |          |  |  |          |          |   |  |          |          |   |  |                     |  |   |            |                                |  |                              |  |
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| SUBTOTAL (2) (\$ <b>0.00</b> )   |                            |   |            |                            |                            |                 |                         |                      |                        |                                     |  |               |          |  |                   |          |          |                           |  |            |            |   |  |          |          |   |  |                                |            |   |  |          |         |   |  |          |          |  |  |          |          |   |  |            |          |  |  |           |           |   |  |          |          |                  |  |          |          |  |  |          |          |                          |  |            |            |   |  |          |         |  |  |            |          |  |  |            |          |                                |  |          |          |                  |  |          |          |                 |  |          |          |                               |  |         |         |                                     |  |          |          |  |  |         |         |  |  |          |          |  |  |          |          |  |  |          |          |   |  |          |          |   |  |                     |  |   |            |                                |  |                              |  |
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| 1201 86  | 2001 43                    | Independent claims in excess of 3   |            |                            |                            |                 |                         |                      |                        |                                     |  |               |          |  |                   |          |          |                           |  |            |            |   |  |          |          |   |  |                                |            |   |  |          |         |   |  |          |          |  |  |          |          |   |  |            |          |  |  |           |           |   |  |          |          |                  |  |          |          |  |  |          |          |                          |  |            |            |   |  |          |         |  |  |            |          |  |  |            |          |                                |  |          |          |                  |  |          |          |                 |  |          |          |                               |  |         |         |                                     |  |          |          |  |  |         |         |  |  |          |          |  |  |          |          |  |  |          |          |   |  |          |          |   |  |                     |  |   |            |                                |  |                              |  |
| 1203 290   | 2003 145                   | Multiple dependent claim  |            |                            |                            |                 |                         |                      |                        |                                     |  |               |          |  |                   |          |          |                           |  |            |            |   |  |          |          |   |  |                                |            |   |  |          |         |   |  |          |          |  |  |          |          |   |  |            |          |  |  |           |           |   |  |          |          |                  |  |          |          |  |  |          |          |                          |  |            |            |   |  |          |         |  |  |            |          |  |  |            |          |                                |  |          |          |                  |  |          |          |                 |  |          |          |                               |  |         |         |                                     |  |          |          |  |  |         |         |  |  |          |          |  |  |          |          |  |  |          |          |   |  |          |          |   |  |                     |  |   |            |                                |  |                              |  |
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| 1205 18  | 2205 9                     | Reissue claims in excess of 20 and over original patent   |            |                            |                            |                 |                         |                      |                        |                                     |  |               |          |  |                   |          |          |                           |  |            |            |   |  |          |          |   |  |                                |            |   |  |          |         |   |  |          |          |  |  |          |          |   |  |            |          |  |  |           |           |   |  |          |          |                  |  |          |          |  |  |          |          |                          |  |            |            |   |  |          |         |  |  |            |          |  |  |            |          |                                |  |          |          |                  |  |          |          |                 |  |          |          |                               |  |         |         |                                     |  |          |          |  |  |         |         |  |  |          |          |  |  |          |          |  |  |          |          |   |  |          |          |   |  |                     |  |   |            |                                |  |                              |  |
| SUBTOTAL (2) (\$ <b>0.00</b> )   |                            |   |            |                            |                            |                 |                         |                      |                        |                                     |  |               |          |  |                   |          |          |                           |  |            |            |   |  |          |          |   |  |                                |            |   |  |          |         |   |  |          |          |  |  |          |          |   |  |            |          |  |  |           |           |   |  |          |          |                  |  |          |          |  |  |          |          |                          |  |            |            |   |  |          |         |  |  |            |          |  |  |            |          |                                |  |          |          |                  |  |          |          |                 |  |          |          |                               |  |         |         |                                     |  |          |          |  |  |         |         |  |  |          |          |  |  |          |          |  |  |          |          |   |  |          |          |   |  |                     |  |   |            |                                |  |                              |  |
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| 1205 18  | 2205 9                     | Reissue claims in excess of 20 and over original patent   |            |                            |                            |                 |                         |                      |                        |                                     |  |               |          |  |                   |          |          |                           |  |            |            |   |  |          |          |   |  |                                |            |   |  |          |         |   |  |          |          |  |  |          |          |   |  |            |          |  |  |           |           |   |  |          |          |                  |  |          |          |  |  |          |          |                          |  |            |            |   |  |          |         |  |  |            |          |  |  |            |          |                                |  |          |          |                  |  |          |          |                 |  |          |          |                               |  |         |         |                                     |  |          |          |  |  |         |         |  |  |          |          |  |  |          |          |  |  |          |          |   |  |          |          |   |  |                     |  |   |            |                                |  |                              |  |
| SUBTOTAL (2) (\$ <b>0.00</b> )   |                            |   |            |                            |                            |                 |                         |                      |                        |                                     |  |               |          |  |                   |          |          |                           |  |            |            |   |  |          |          |   |  |                                |            |   |  |          |         |   |  |          |          |  |  |          |          |   |  |            |          |  |  |           |           |   |  |          |          |                  |  |          |          |  |  |          |          |                          |  |            |            |   |  |          |         |  |  |            |          |  |  |            |          |                                |  |          |          |                  |  |          |          |                 |  |          |          |                               |  |         |         |                                     |  |          |          |  |  |         |         |  |  |          |          |  |  |          |          |  |  |          |          |   |  |          |          |   |  |                     |  |   |            |                                |  |                              |  |
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| 1202 18  | 2202 9                     | Claims in excess of 20  |            |                            |                            |                 |                         |                      |                        |                                     |  |               |          |  |                   |          |          |                           |  |            |            |   |  |          |          |   |  |                                |            |   |  |          |         |   |  |          |          |  |  |          |          |   |  |            |          |  |  |           |           |   |  |          |          |                  |  |          |          |  |  |          |          |                          |  |            |            |   |  |          |         |  |  |            |          |  |  |            |          |                                |  |          |          |                  |  |          |          |                 |  |          |          |                               |  |         |         |                                     |  |          |          |  |  |         |         |  |  |          |          |  |  |          |          |  |  |          |          |   |  |          |          |   |  |                     |  |   |            |                                |  |                              |  |
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| 1203 290   | 2003 145                   | Multiple dependent claim  |            |                            |                            |                 |                         |                      |                        |                                     |  |               |          |  |                   |          |          |                           |  |            |            |   |  |          |          |   |  |                                |            |   |  |          |         |   |  |          |          |  |  |          |          |   |  |            |          |  |  |           |           |   |  |          |          |                  |  |          |          |  |  |          |          |                          |  |            |            |   |  |          |         |  |  |            |          |  |  |            |          |                                |  |          |          |                  |  |          |          |                 |  |          |          |                               |  |         |         |                                     |  |          |          |  |  |         |         |  |  |          |          |  |  |          |          |  |  |          |          |   |  |          |          |   |  |                     |  |   |            |                                |  |                              |  |
| 1204 86  | 2004 43                    | Reissue independent claims over original patent   |            |                            |                            |                 |                         |                      |                        |                                     |  |               |          |  |                   |          |          |                           |  |            |            |   |  |          |          |   |  |                                |            |   |  |          |         |   |  |          |          |  |  |          |          |   |  |            |          |  |  |           |           |   |  |          |          |                  |  |          |          |  |  |          |          |                          |  |            |            |   |  |          |         |  |  |            |          |  |  |            |          |                                |  |          |          |                  |  |          |          |                 |  |          |          |                               |  |         |         |                                     |  |          |          |  |  |         |         |  |  |          |          |  |  |          |          |  |  |          |          |   |  |          |          |   |  |                     |  |   |            |                                |  |                              |  |
| 1205 18  | 2205 9                     | Reissue claims in excess of 20 and over original patent   |            |                            |                            |                 |                         |                      |                        |                                     |  |               |          |  |                   |          |          |                           |  |            |            |   |  |          |          |   |  |                                |            |   |  |          |         |   |  |          |          |  |  |          |          |   |  |            |          |  |  |           |           |   |  |          |          |                  |  |          |          |  |  |          |          |                          |  |            |            |   |  |          |         |  |  |            |          |  |  |            |          |                                |  |          |          |                  |  |          |          |                 |  |          |          |                               |  |         |         |                                     |  |          |          |  |  |         |         |  |  |          |          |  |  |          |          |  |  |          |          |   |  |          |          |   |  |                     |  |   |            |                                |  |                              |  |
| SUBTOTAL (2) (\$ <b>0.00</b> )   |                            |   |            |                            |                            |                 |                         |                      |                        |                                     |  |               |          |  |                   |          |          |                           |  |            |            |   |  |          |          |   |  |                                |            |   |  |          |         |   |  |          |          |  |  |          |          |   |  |            |          |  |  |           |           |   |  |          |          |                  |  |          |          |  |  |          |          |                          |  |            |            |   |  |          |         |  |  |            |          |  |  |            |          |                                |  |          |          |                  |  |          |          |                 |  |          |          |                               |  |         |         |                                     |  |          |          |  |  |         |         |  |  |          |          |  |  |          |          |  |  |          |          |   |  |          |          |   |  |                     |  |   |            |                                |  |                              |  |
| <p><b>23. CLAIMS</b></p> <table border="1" style="width: 100%; border-collapse: collapse;"> <thead> <tr> <th>Large Entity Fee Code (\$)</th> <th>Small Entity Fee Code (\$)</th> <th>Fee Description</th> <th>Fee Paid</th> </tr> </thead> <tbody> <tr><td>1202 18</td><td>2202 9</td><td>Claims in excess of 20</td><td></td></tr> <tr><td>1201 86</td><td>2001 43</td><td>Independent claims in excess of 3</td><td></td></tr> <tr><td>1203 290</td><td>2003 145</td><td>Multiple dependent claim</td><td></td></tr> <tr><td>1204 86</td><td>2004 43</td><td>Reissue independent claims over original patent</td><td></td></tr> <tr><td>1205 18</td><td>2205 9</td><td>Reissue claims in excess of 20 and over original patent</td><td></td></tr> <tr> <td colspan="2">SUBTOTAL (2) (\$ <b>0.00</b>)</td> <td colspan="2"></td> </tr> </tbody> </table>      |                            |   |            | Large Entity Fee Code (\$) | Small Entity Fee Code (\$) | Fee Description | Fee Paid                | 1202 18              | 2202 9                 | Claims in excess of 20              |  | 1201 86       | 2001 43  | Independent claims in excess of 3                      |                   | 1203 290 | 2003 145 | Multiple dependent claim  |  | 1204 86    | 2004 43    | Reissue independent claims over original patent |  | 1205 18  | 2205 9   | Reissue claims in excess of 20 and over original patent |  | SUBTOTAL (2) (\$ <b>0.00</b> ) |            |   |  |          |         |   |  |          |          |  |  |          |          |   |  |            |          |  |  |           |           |   |  |          |          |                  |  |          |          |  |  |          |          |                          |  |            |            |   |  |          |         |  |  |            |          |  |  |            |          |                                |  |          |          |                  |  |          |          |                 |  |          |          |                               |  |         |         |                                     |  |          |          |  |  |         |         |  |  |          |          |  |  |          |          |  |  |          |          |   |  |          |          |   |  |                     |  |   |            |                                |  |                              |  |
| Large Entity Fee Code (\$)   | Small Entity Fee Code (\$) | Fee Description   | Fee Paid   |                            |                            |                 |                         |                      |                        |                                     |  |               |          |  |                   |          |          |                           |  |            |            |   |  |          |          |   |  |                                |            |   |  |          |         |   |  |          |          |  |  |          |          |   |  |            |          |  |  |           |           |   |  |          |          |                  |  |          |          |  |  |          |          |                          |  |            |            |   |  |          |         |  |  |            |          |  |  |            |          |                                |  |          |          |                  |  |          |          |                 |  |          |          |                               |  |         |         |                                     |  |          |          |  |  |         |         |  |  |          |          |  |  |          |          |  |  |          |          |   |  |          |          |   |  |                     |  |   |            |                                |  |                              |  |
| 1202 18  | 2202 9                     | Claims in excess of 20  |            |                            |                            |                 |                         |                      |                        |                                     |  |               |          |  |                   |          |          |                           |  |            |            |   |  |          |          |   |  |                                |            |   |  |          |         |   |  |          |          |  |  |          |          |   |  |            |          |  |  |           |           |   |  |          |          |                  |  |          |          |  |  |          |          |                          |  |            |            |   |  |          |         |  |  |            |          |  |  |            |          |                                |  |          |          |                  |  |          |          |                 |  |          |          |                               |  |         |         |                                     |  |          |          |  |  |         |         |  |  |          |          |  |  |          |          |  |  |          |          |   |  |          |          |   |  |                     |  |   |            |                                |  |                              |  |
| 1201 86  | 2001 43                    | Independent claims in excess of 3   |            |                            |                            |                 |                         |                      |                        |                                     |  |               |          |  |                   |          |          |                           |  |            |            |   |  |          |          |   |  |                                |            |   |  |          |         |   |  |          |          |  |  |          |          |   |  |            |          |  |  |           |           |   |  |          |          |                  |  |          |          |  |  |          |          |                          |  |            |            |   |  |          |         |  |  |            |          |  |  |            |          |                                |  |          |          |                  |  |          |          |                 |  |          |          |                               |  |         |         |                                     |  |          |          |  |  |         |         |  |  |          |          |  |  |          |          |  |  |          |          |   |  |          |          |   |  |                     |  |   |            |                                |  |                              |  |
| 1203 290   | 2003 145                   | Multiple dependent claim  |            |                            |                            |                 |                         |                      |                        |                                     |  |               |          |  |                   |          |          |                           |  |            |            |   |  |          |          |   |  |                                |            |   |  |          |         |   |  |          |          |  |  |          |          |   |  |            |          |  |  |           |           |   |  |          |          |                  |  |          |          |  |  |          |          |                          |  |            |            |   |  |          |         |  |  |            |          |  |  |            |          |                                |  |          |          |                  |  |          |          |                 |  |          |          |                               |  |         |         |                                     |  |          |          |  |  |         |         |  |  |          |          |  |  |          |          |  |  |          |          |   |  |          |          |   |  |                     |  |   |            |                                |  |                              |  |
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| 1205 18  | 2205 9                     | Reissue claims in excess of 20 and over original patent   |            |                            |                            |                 |                         |                      |                        |                                     |  |               |          |  |                   |          |          |                           |  |            |            |   |  |          |          |   |  |                                |            |   |  |          |         |   |  |          |          |  |  |          |          |   |  |            |          |  |  |           |           |   |  |          |          |                  |  |          |          |  |  |          |          |                          |  |            |            |   |  |          |         |  |  |            |          |  |  |            |          |                                |  |          |          |                  |  |          |          |                 |  |          |          |                               |  |         |         |                                     |  |          |          |  |  |         |         |  |  |          |          |  |  |          |          |  |  |          |          |   |  |          |          |   |  |                     |  |   |            |                                |  |                              |  |
| SUBTOTAL (2) (\$ <b>0.00</b> )   |                            |   |            |                            |                            |                 |                         |                      |                        |                                     |  |               |          |  |                   |          |          |                           |  |            |            |   |  |          |          |   |  |                                |            |   |  |          |         |   |  |          |          |  |  |          |          |   |  |            |          |  |  |           |           |   |  |          |          |                  |  |          |          |  |  |          |          |                          |  |            |            |   |  |          |         |  |  |            |          |  |  |            |          |                                |  |          |          |                  |  |          |          |                 |  |          |          |                               |  |         |         |                                     |  |          |          |  |  |         |         |  |  |          |          |  |  |          |          |  |  |          |          |   |  |          |          |   |  |                     |  |   |            |                                |  |                              |  |
| <p><b>24. CLAIMS</b></p> <table border="1" style="width: 100%; border-collapse: collapse;"> <thead> <tr> <th>Large Entity Fee Code (\$)</th> <th>Small Entity Fee Code (\$)</th> <th>Fee Description</th> <th>Fee Paid</th> </tr> </thead> <tbody> <tr><td>1202 18</td><td>2202 9</td><td>Claims in excess of 20</td><td></td></tr> <tr><td>1201 86</td><td>2001 43</td><td>Independent claims in excess of 3</td><td></td></tr> <tr><td>1203 290</td><td>2003 145</td><td>Multiple dependent claim</td><td></td></tr> <tr><td>1204 86</td><td>2004 43</td><td>Reissue independent claims over original patent</td><td></td></tr> <tr><td>1205 18</td><td>2205 9</td><td>Reissue claims in excess of 20 and over original patent</td><td></td></tr> <tr> <td colspan="2">SUBTOTAL (2) (\$ <b>0.00</b>)</td> <td colspan="2"></td> </tr> </tbody> </table>      |                            |   |            | Large Entity Fee Code (\$) | Small Entity Fee Code (\$) | Fee Description | Fee Paid                | 1202 18              | 2202 9                 | Claims in excess of 20              |  | 1201 86       | 2001 43  | Independent claims in excess of 3                      |                   | 1203 290 | 2003 145 | Multiple dependent claim  |  | 1204 86    | 2004 43    | Reissue independent claims over original patent |  | 1205 18  | 2205 9   | Reissue claims in excess of 20 and over original patent |  | SUBTOTAL (2) (\$ <b>0.00</b> ) |            |   |  |          |         |   |  |          |          |  |  |          |          |   |  |            |          |  |  |           |           |   |  |          |          |                  |  |          |          |  |  |          |          |                          |  |            |            |   |  |          |         |  |  |            |          |  |  |            |          |                                |  |          |          |                  |  |          |          |                 |  |          |          |                               |  |         |         |                                     |  |          |          |  |  |         |         |  |  |          |          |  |  |          |          |  |  |          |          |   |  |          |          |   |  |                     |  |   |            |                                |  |                              |  |
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| 1202 18  | 2202 9                     | Claims in excess of 20  |            |                            |                            |                 |                         |                      |                        |                                     |  |               |          |  |                   |          |          |                           |  |            |            |   |  |          |          |   |  |                                |            |   |  |          |         |   |  |          |          |  |  |          |          |   |  |            |          |  |  |           |           |   |  |          |          |                  |  |          |          |  |  |          |          |                          |  |            |            |   |  |          |         |  |  |            |          |  |  |            |          |                                |  |          |          |                  |  |          |          |                 |  |          |          |                               |  |         |         |                                     |  |          |          |  |  |         |         |  |  |          |          |  |  |          |          |  |  |          |          |   |  |          |          |   |  |                     |  |   |            |                                |  |                              |  |
| 1201 86  | 2001 43                    | Independent claims in excess of 3   |            |                            |                            |                 |                         |                      |                        |                                     |  |               |          |  |                   |          |          |                           |  |            |            |   |  |          |          |   |  |                                |            |   |  |          |         |   |  |          |          |  |  |          |          |   |  |            |          |  |  |           |           |   |  |          |          |                  |  |          |          |  |  |          |          |                          |  |            |            |   |  |          |         |  |  |            |          |  |  |            |          |                                |  |          |          |                  |  |          |          |                 |  |          |          |                               |  |         |         |                                     |  |          |          |  |  |         |         |  |  |          |          |  |  |          |          |  |  |          |          |   |  |          |          |   |  |                     |  |   |            |                                |  |                              |  |
| 1203 290   | 2003 145                   | Multiple dependent claim  |            |                            |                            |                 |                         |                      |                        |                                     |  |               |          |  |                   |          |          |                           |  |            |            |   |  |          |          |   |  |                                |            |   |  |          |         |   |  |          |          |  |  |          |          |   |  |            |          |  |  |           |           |   |  |          |          |                  |  |          |          |  |  |          |          |                          |  |            |            |   |  |          |         |  |  |            |          |  |  |            |          |                                |  |          |          |                  |  |          |          |                 |  |          |          |                               |  |         |         |                                     |  |          |          |  |  |         |         |  |  |          |          |  |  |          |          |  |  |          |          |   |  |          |          |   |  |                     |  |   |            |                                |  |                              |  |
| 1204 86  | 2004 43                    | Reissue independent claims over original patent   |            |                            |                            |                 |                         |                      |                        |                                     |  |               |          |  |                   |          |          |                           |  |            |            |   |  |          |          |   |  |                                |            |   |  |          |         |   |  |          |          |  |  |          |          |   |  |            |          |  |  |           |           |   |  |          |          |                  |  |          |          |  |  |          |          |                          |  |            |            |   |  |          |         |  |  |            |          |  |  |            |          |                                |  |          |          |                  |  |          |          |                 |  |          |          |                               |  |         |         |                                     |  |          |          |  |  |         |         |  |  |          |          |  |  |          |          |  |  |          |          |   |  |          |          |   |  |                     |  |   |            |                                |  |                              |  |
| 1205 18  | 2205 9                     | Reissue claims in excess of 20 and over original patent   |            |                            |                            |                 |                         |                      |                        |                                     |  |               |          |  |                   |          |          |                           |  |            |            |   |  |          |          |   |  |                                |            |   |  |          |         |   |  |          |          |  |  |          |          |   |  |            |          |  |  |           |           |   |  |          |          |                  |  |          |          |  |  |          |          |                          |  |            |            |   |  |          |         |  |  |            |          |  |  |            |          |                                |  |          |          |                  |  |          |          |                 |  |          |          |                               |  |         |         |                                     |  |          |          |  |  |         |         |  |  |          |          |  |  |          |          |  |  |          |          |   |  |          |          |   |  |                     |  |   |            |                                |  |                              |  |
| SUBTOTAL (2) (\$ <b>0.00</b> )   |                            |   |            |                            |                            |                 |                         |                      |                        |                                     |  |               |          |  |                   |          |          |                           |  |            |            |   |  |          |          |   |  |                                |            |   |  |          |         |   |  |          |          |  |  |          |          |   |  |            |          |  |  |           |           |   |  |          |          |                  |  |          |          |  |  |          |          |                          |  |            |            |   |  |          |         |  |  |            |          |  |  |            |          |                                |  |          |          |                  |  |          |          |                 |  |          |          |                               |  |         |         |                                     |  |          |          |  |  |         |         |  |  |          |          |  |  |          |          |  |  |          |          |   |  |          |          |   |  |                     |  |   |            |                                |  |                              |  |
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| 1202 18  | 2202 9                     | Claims in excess of 20  |            |                            |                            |                 |                         |                      |                        |                                     |  |               |          |  |                   |          |          |                           |  |            |            |   |  |          |          |   |  |                                |            |   |  |          |         |   |  |          |          |  |  |          |          |   |  |            |          |  |  |           |           |   |  |          |          |                  |  |          |          |  |  |          |          |                          |  |            |            |   |  |          |         |  |  |            |          |  |  |            |          |                                |  |          |          |                  |  |          |          |                 |  |          |          |                               |  |         |         |                                     |  |          |          |  |  |         |         |  |  |          |          |  |  |          |          |  |  |          |          |   |  |          |          |   |  |                     |  |   |            |                                |  |                              |  |
| 1201 86  | 2001 43                    | Independent claims in excess of 3   |            |                            |                            |                 |                         |                      |                        |                                     |  |               |          |  |                   |          |          |                           |  |            |            |   |  |          |          |   |  |                                |            |   |  |          |         |   |  |          |          |  |  |          |          |   |  |            |          |  |  |           |           |   |  |          |          |                  |  |          |          |  |  |          |          |                          |  |            |            |   |  |          |         |  |  |            |          |  |  |            |          |                                |  |          |          |                  |  |          |          |                 |  |          |          |                               |  |         |         |                                     |  |          |          |  |  |         |         |  |  |          |          |  |  |          |          |  |  |          |          |   |  |          |          |   |  |                     |  |   |            |                                |  |                              |  |
| 1203 290   | 2003 145                   | Multiple dependent claim  |            |                            |                            |                 |                         |                      |                        |                                     |  |               |          |  |                   |          |          |                           |  |            |            |   |  |          |          |   |  |                                |            |   |  |          |         |   |  |          |          |  |  |          |          |   |  |            |          |  |  |           |           |   |  |          |          |                  |  |          |          |  |  |          |          |                          |  |            |            |   |  |          |         |  |  |            |          |  |  |            |          |                                |  |          |          |                  |  |          |          |                 |  |          |          |                               |  |         |         |                                     |  |          |          |  |  |         |         |  |  |          |          |  |  |          |          |  |  |          |          |   |  |          |          |   |  |                     |  |   |            |                                |  |                              |  |
| 1204 86  | 2004 43                    | Reissue independent claims over original patent   |            |                            |                            |                 |                         |                      |                        |                                     |  |               |          |  |                   |          |          |                           |  |            |            |   |  |          |          |   |  |                                |            |   |  |          |         |   |  |          |          |  |  |          |          |   |  |            |          |  |  |           |           |   |  |          |          |                  |  |          |          |  |  |          |          |                          |  |            |            |   |  |          |         |  |  |            |          |  |  |            |          |                                |  |          |          |                  |  |          |          |                 |  |          |          |                               |  |         |         |                                     |  |          |          |  |  |         |         |  |  |          |          |  |  |          |          |  |  |          |          |   |  |          |          |   |  |                     |  |   |            |                                |  |                              |  |
| 1205 18  | 2205 9                     | Reissue claims in excess of 20 and over original patent   |            |                            |                            |                 |                         |                      |                        |                                     |  |               |          |  |                   |          |          |                           |  |            |            |   |  |          |          |   |  |                                |            |   |  |          |         |   |  |          |          |  |  |          |          |   |  |            |          |  |  |           |           |   |  |          |          |                  |  |          |          |  |  |          |          |                          |  |            |            |   |  |          |         |  |  |            |          |  |  |            |          |                                |  |          |          |                  |  |          |          |                 |  |          |          |                               |  |         |         |                                     |  |          |          |  |  |         |         |  |  |          |          |  |  |          |          |  |  |          |          |   |  |          |          |   |  |                     |  |   |            |                                |  |                              |  |
| SUBTOTAL (2) (\$ <b>0.00</b> )   |                            |   |            |                            |                            |                 |                         |                      |                        |                                     |  |               |          |  |                   |          |          |                           |  |            |            |   |  |          |          |   |  |                                |            |   |  |          |         |   |  |          |          |  |  |          |          |   |  |            |          |  |  |           |           |   |  |          |          |                  |  |          |          |  |  |          |          |                          |  |            |            |   |  |          |         |  |  |            |          |  |  |            |          |                                |  |          |          |                  |  |          |          |                 |  |          |          |                               |  |         |         |                                     |  |          |          |  |  |         |         |  |  |          |          |  |  |          |          |  |  |          |          |   |  |          |          |   |  |                     |  |   |            |                                |  |                              |  |
| <p><b>26. CLAIMS</b></p> <table border="1" style="width: 100%; border-collapse: collapse;"> <thead> <tr> <th>Large Entity Fee Code (\$)</th> <th>Small Entity Fee Code (\$)</th> <th>Fee Description</th> <th>Fee Paid</th> </tr> </thead> <tbody> <tr><td>1202 18</td><td>2202 9</td><td>Claims in excess of 20</td><td></td></tr> <tr><td>1201 86</td><td>2001 43</td><td>Independent claims in excess of 3</td><td></td></tr> <tr><td>1203 290</td><td>2003 145</td><td>Multiple dependent claim</td><td></td></tr> <tr><td>1204 86</td><td>2004 43</td><td>Reissue independent claims over original patent</td><td></td></tr> <tr><td>1205 18</td><td>2205 9</td><td>Reissue claims in excess of 20 and over original patent</td><td></td></tr> <tr> <td colspan="2">SUBTOTAL (2) (\$ <b>0.00</b>)</td> <td colspan="2"></td> </tr> </tbody> </table>      |                            |   |            | Large Entity Fee Code (\$) | Small Entity Fee Code (\$) | Fee Description | Fee Paid                | 1202 18              | 2202 9                 | Claims in excess of 20              |  | 1201 86       | 2001 43  | Independent claims in excess of 3                      |                   | 1203 290 | 2003 145 | Multiple dependent claim  |  | 1204 86    | 2004 43    | Reissue independent claims over original patent |  | 1205 18  | 2205 9   | Reissue claims in excess of 20 and over original patent |  | SUBTOTAL (2) (\$ <b>0.00</b> ) |            |   |  |          |         |   |  |          |          |  |  |          |          |   |  |            |          |  |  |           |           |   |  |          |          |                  |  |          |          |  |  |          |          |                          |  |            |            |   |  |          |         |  |  |            |          |  |  |            |          |                                |  |          |          |                  |  |          |          |                 |  |          |          |                               |  |         |         |                                     |  |          |          |  |  |         |         |  |  |          |          |  |  |          |          |  |  |          |          |   |  |          |          |   |  |                     |  |   |            |                                |  |                              |  |
| Large Entity Fee Code (\$)   | Small Entity Fee Code (\$) | Fee Description   | Fee Paid   |                            |                            |                 |                         |                      |                        |                                     |  |               |          |  |                   |          |          |                           |  |            |            |   |  |          |          |   |  |                                |            |   |  |          |         |   |  |          |          |  |  |          |          |   |  |            |          |  |  |           |           |   |  |          |          |                  |  |          |          |  |  |          |          |                          |  |            |            |   |  |          |         |  |  |            |          |  |  |            |          |                                |  |          |          |                  |  |          |          |                 |  |          |          |                               |  |         |         |                                     |  |          |          |  |  |         |         |  |  |          |          |  |  |          |          |  |  |          |          |   |  |          |          |   |  |                     |  |   |            |                                |  |                              |  |
| 1202 18  | 2202 9                     | Claims in excess of 20  |            |                            |                            |                 |                         |                      |                        |                                     |  |               |          |  |                   |          |          |                           |  |            |            |   |  |          |          |   |  |                                |            |   |  |          |         |   |  |          |          |  |  |          |          |   |  |            |          |  |  |           |           |   |  |          |          |                  |  |          |          |  |  |          |          |                          |  |            |            |   |  |          |         |  |  |            |          |  |  |            |          |                                |  |          |          |                  |  |          |          |                 |  |          |          |                               |  |         |         |                                     |  |          |          |  |  |         |         |  |  |          |          |  |  |          |          |  |  |          |          |   |  |          |          |   |  |                     |  |   |            |                                |  |                              |  |
| 1201 86  | 2001 43                    | Independent claims in excess of 3   |            |                            |                            |                 |                         |                      |                        |                                     |  |               |          |  |                   |          |          |                           |  |            |            |   |  |          |          |   |  |                                |            |   |  |          |         |   |  |          |          |  |  |          |          |   |  |            |          |  |  |           |           |   |  |          |          |                  |  |          |          |  |  |          |          |                          |  |            |            |   |  |          |         |  |  |            |          |  |  |            |          |                                |  |          |          |                  |  |          |          |                 |  |          |          |                               |  |         |         |                                     |  |          |          |  |  |         |         |  |  |          |          |  |  |          |          |  |  |          |          |   |  |          |          |   |  |                     |  |   |            |                                |  |                              |  |
| 1203 290   | 2003 145                   | Multiple dependent claim  |            |                            |                            |                 |                         |                      |                        |                                     |  |               |          |  |                   |          |          |                           |  |            |            |   |  |          |          |   |  |                                |            |   |  |          |         |   |  |          |          |  |  |          |          |   |  |            |          |  |  |           |           |   |  |          |          |                  |  |          |          |  |  |          |          |                          |  |            |            |   |  |          |         |  |  |            |          |  |  |            |          |                                |  |          |          |                  |  |          |          |                 |  |          |          |                               |  |         |         |                                     |  |          |          |  |  |         |         |  |  |          |          |  |  |          |          |  |  |          |          |   |  |          |          |   |  |                     |  |   |            |                                |  |                              |  |
| 1204 86  | 2004 43                    | Reissue independent claims over original patent   |            |                            |                            |                 |                         |                      |                        |                                     |  |               |          |  |                   |          |          |                           |  |            |            |   |  |          |          |   |  |                                |            |   |  |          |         |   |  |          |          |  |  |          |          |   |  |            |          |  |  |           |           |   |  |          |          |                  |  |          |          |  |  |          |          |                          |  |            |            |   |  |          |         |  |  |            |          |  |  |            |          |                                |  |          |          |                  |  |          |          |                 |  |          |          |                               |  |         |         |                                     |  |          |          |  |  |         |         |  |  |          |          |  |  |          |          |  |  |          |          |   |  |          |          |   |  |                     |  |   |            |                                |  |                              |  |
| 1205 18  | 2205 9                     | Reissue claims in excess of 20 and over original patent   |            |                            |                            |                 |                         |                      |                        |                                     |  |               |          |  |                   |          |          |                           |  |            |            |   |  |          |          |   |  |                                |            |   |  |          |         |   |  |          |          |  |  |          |          |   |  |            |          |  |  |           |           |   |  |          |          |                  |  |          |          |  |  |          |          |                          |  |            |            |   |  |          |         |  |  |            |          |  |  |            |          |                                |  |          |          |                  |  |          |          |                 |  |          |          |                               |  |         |         |                                     |  |          |          |  |  |         |         |  |  |          |          |  |  |          |          |  |  |          |          |   |  |          |          |   |  |                     |  |   |            |                                |  |                              |  |
| SUBTOTAL (2) (\$ <b>0.00</b> )   |                            |   |            |                            |                            |                 |                         |                      |                        |                                     |  |               |          |  |                   |          |          |                           |  |            |            |   |  |          |          |   |  |                                |            |   |  |          |         |   |  |          |          |  |  |          |          |   |  |            |          |  |  |           |           |   |  |          |          |                  |  |          |          |  |  |          |          |                          |  |            |            |   |  |          |         |  |  |            |          |  |  |            |          |                                |  |          |          |                  |  |          |          |                 |  |          |          |                               |  |         |         |                                     |  |          |          |  |  |         |         |  |  |          |          |  |  |          |          |  |  |          |          |   |  |          |          |   |  |                     |  |   |            |                                |  |                              |  |
| <p><b>27. CLAIMS</b></p> <table border="1" style="width: 100%; border-collapse: collapse;"> <thead> <tr> <th>Large Entity Fee Code (\$)</th> <th>Small</th></tr></thead></table>   |                            |   |            | Large Entity Fee Code (\$) | Small                      |                 |                         |                      |                        |                                     |  |               |          |  |                   |          |          |                           |  |            |            |   |  |          |          |   |  |                                |            |   |  |          |         |   |  |          |          |  |  |          |          |   |  |            |          |  |  |           |           |   |  |          |          |                  |  |          |          |  |  |          |          |                          |  |            |            |   |  |          |         |  |  |            |          |  |  |            |          |                                |  |          |          |                  |  |          |          |                 |  |          |          |                               |  |         |         |                                     |  |          |          |  |  |         |         |  |  |          |          |  |  |          |          |  |  |          |          |   |  |          |          |   |  |                     |  |   |            |                                |  |                              |  |
| Large Entity Fee Code (\$)   | Small                      |   |            |                            |                            |                 |                         |                      |                        |                                     |  |               |          |  |                   |          |          |                           |  |            |            |   |  |          |          |   |  |                                |            |   |  |          |         |   |  |          |          |  |  |          |          |   |  |            |          |  |  |           |           |   |  |          |          |                  |  |          |          |  |  |          |          |                          |  |            |            |   |  |          |         |  |  |            |          |  |  |            |          |                                |  |          |          |                  |  |          |          |                 |  |          |          |                               |  |         |         |                                     |  |          |          |  |  |         |         |  |  |          |          |  |  |          |          |  |  |          |          |   |  |          |          |   |  |                     |  |   |            |                                |  |                              |  |